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Of Counsel
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JENSEN & COEUR-BARRON, LLP
5100 Campus Drive, Suite 200
Newport Beach, CA 92660
Telephone: (949) 261-6255
Facsimile: (949) 261-8670

June 19, 2006

Via Federal Express
Michael Massey, Esq.
Office of Regional Counsel (ORC-3)
U.S. EPA, Region IX
75 Hawthorne Street
San Francisco, CA 94105

Re: General Notice Letter/104(e) for the San Fernando Valley/North Hollywood Superfund Site
North Hollywood, CA

Dear Mr. Massey:

Provided herewith on behalf of California Car Hikers Service, a California corporation ("CCHS" herein), are the final set of responses to the 37 questions posed under "Enclosure D: Information Request," accompanying that certain letter dated March 28, 2006 from Elizabeth Adams, Chief, Site Cleanup Branch, Superfund Division.

Our previous response to Question No. 1 under "Enclosure D: Information Request," accompanying that certain letter dated March 28, 2006 forwarded by my letter dated May 15, 2006, is incorporated herein by reference.

20. (a) and (f): A scaled map reflecting the location of tanks and storage areas, with a legend on the right side of the map corresponding to the numbers marked on the map, is provided herewith under Exhibit Tab "1."

(a) and (e): A scaled map reflecting the location of surface structures, with a legend on the left side of the map corresponding to the alphabetic labels marked on the map, with dates identified in the legend, is provided herewith under Exhibit Tab "2."

(c) CCHS refers to and incorporates herein by reference its consultant's prior report, dated March 10, 2006, responding to the EPA's February 10, 2006 letter, a duplicate copy of which was provided under Exhibit Tab "5" to this writer's letter dated June 1, 2006 and in response to Question No. 25.

(b), (d) and (e): A scaled map reflecting the location of the stormwater drainage system, clarifier, and underground storage tank (10,000 gal.; removed and area

backfilled 1991/1992), with a legend on the left side of the map, is provided herewith under Exhibit Tab "3."

21. Copies of the following hazardous material business plans are provided herewith under Exhibit Tab "4":

(i) Hazardous Waste and Hazardous Materials Management Program Consolidated Permit, Issued 12/14/2005 by the Fire Prevention Bureau, Technical Section, Fire Department;

(ii) Hazardous Waste and Hazardous Materials Management Program Consolidated Permit, Issued 9/01/2003;

(iii) Hazardous Waste and Hazardous Materials Management Program Consolidated Permit, Issued 8/19/2002; and

(iv) Emergency Response Plan, Dated 7/14/97

Chemical inventory forms are provided herewith under Exhibit Tab "5."

22. Following is a list of all chemicals and so-called hazardous substances, and estimated quantity:

	Chemicals	Monthly Quantity (Avg.)
I.	Air-Bags (Undeployed)	Minimal
II.	Antifreeze	100 Gal. / Mo. Avg.
III.	Asbestos Brake Pads	80pcs/year Avg.
IV.	Batteries	800/Month Avg.
V.	Brake Fluid	Minimal
VI.	Concrete (unhardened)	20 Yd. Avg./Year
VII.	Enamel Aerosol	3 Cans / Mo. Avg.
VIII.	Engine Motor Oil	
	A. Chevron Supreme Motor Oil SAE-10/30	30 Case / Year
	B. Chevron Motor Oils SAE-20/50	30 Case / Year
	C.Chevron DELO 400	4-55 Gal. Drum / Mo.
	D. Chevron Hyfraulic Oil – ISO 32, 68	4-55 Gal drum / Mo.

	E. Lucas Oil Treatment	8 Case / Mo.
IX.	Eyewash Solution	1.5 Gal. / Year Avg.
X.	Gasoline – Diesel	3,000 Gal. / Mo
XI.	Gasoline – Unleaded	400 Gal. / Mo.
XII.	Gear Lubricant	105 Lbs. / Mo.
XIII.	Lead Scrap	Minimal
XIV.	Liquid Oxygen	6,000 Cu Ft./Mo Avg.
XV.	Mercury Switches	5 Lb. / Mo. Avg.
XVI.	Power Steering Fluid	Minimal
XVII.	Refrigerant – R12	25 Lb./Mo. Avg.
XVIII.	Refrigerant – R134a	75 Lb./Mo. Avg.
XIX.	Transmission Fluid	Minimal
XX.	Welding – Acetylene	<50 Cu Ft./Mo. Avg.
XXI.	Welding – Propane	157.16 Gal/mo Avg.
XXII.	Rubbish	20 Ton/Mo Avg.

Copies of the Material Safety Data Sheets for each chemical identified above is provided herewith under Exhibit Tab "6."

23. (a.), (b), and (d): To the best of CCHS's knowledge, with the exception of MTBE, (an additive to gasoline during the approximate period 1990-2002, and conceivably contained in gasoline removed from junk automobiles in minimal amounts), volatile organic compounds are not and were not used at or transported to the Facility.

(c) CCHS refers to and incorporates by reference its response to Question No. 29, below.

(e) Not applicable

27. Copies of the following are provided herewith under Exhibit Tab "7":

(i)Tire Program Identification Number (TPID) issued by the California Integrated Waste Management Board;

(ii) California EPA Identification No., issued by the California Department of Toxic Substances Control;

(iii) Notice of Intent, State of California State Water Resources Control Board, along with copies of Annual Reports from the State of California State Water Resources Control Board dated July 1, 1995-June 30, 1996, July 1, 1998-June 30, 1999, July 1, 1999- June 30, 2000, July 1, 2000- June 30, 2001, July 1, 2001-June 30, 2002, July 1, 2002- June 30, 2003, July 1, 2004- June 30, 2005;

(iv) Copies of Permit Renewals, South Coast Air Quality Management District, dated January 16, 1996, January 16, 1997, January 6, 1999, January 16, 2001, March 19, 2002, January 16, 2003, February 3, 2004, January 19, 2005, and February 1, 2006.

29. The procedures for (A) collection, (B), storage, (C) treatment, (D) transport, and (E) disposal of waste streams at the Real Property comprising the Facility are as follows:

I. Automobile Batteries
   A. Removed and collected from vehicles
   B. Placed in double contained plastic storage boxes
   C. No treatment involved or necessary
   B. Picked up and transported by purchasing company
   C. Sold to battery recycling companies

II. Brake Fluid
   A. Brake lines bled and fluid collected in oil pans
   B. Stored in 55 Gal. double contained drums and kept under awning
   C. No treatment involved or necessary
   D. Picked up and transported by disposal company
   E. Sent to fluid recycling company

III. Engine Coolant (Antifreeze)
   A. Drained from vehicle in fluid removal section
   B. Stored in 500 Gal. double contained, covered storage tank
   C. No treatment involved or necessary
   D. Picked up and transported by recycling company
   E. Sent to fluid recycling company

IV. Mercury Switches

B. Stored in a covered 5 Gal. bucket and kept in a storage metal box
C. No treatment involved or necessary
D. Transported as per instructions by disposal company
E. Shipped to disposal site via carrier/transport companies

V. Refrigerant (R-12 and R134a)
A. Using a refrigerant extraction unit, refrigerant is removed from vehicles and into cylinders.
B. Stored in cylinders that are kept in the main office, once full
C. No treatment involved or necessary
D. Picked up and transported by purchasing companies
E. Sold to refrigerant recycling companies

VI. Scrap Metal
A. After dismantling vehicles, they are crushed and stacked onto trailers.
B. Aluminum, copper wire and miscellaneous scrap vehicle parts are stored in covered, metal boxes. Cast metal scrap is stored in roll-off boxes.
C. No treatment involved or necessary
D. Vehicle crushed bodies are transported on trailers and cast metal scrap in roll-off boxes is transported to scrap yards in the same boxes. Aluminum, copper wire and other miscellaneous scrap vehicle parts are transported by scrap buyers
E. Crushed vehicles and cast metal is sold to metal scrap yards for recycling. All other scrap is sold to individuals in the recycling business.

VII. Used Oil
A. Oil is removed from vehicles using gravity draining pans
B. Stored in a 500 Gal. double contained oil storage tank.
C. No treatment involved or necessary
D. Transported by recycling/disposal company
E. Picked up on a regular basis by oil recycling/disposal companies

VIII. Waste gasoline
A. Extracted from vehicles pumped into a 400 gal. portable tank.
B. The gasoline is stored in a 5,000 gal. above-ground storage tank that sits on a platform with a 2 foot berm built around it. The storage tank is fitted with a pump for removing the gasoline from the portable tank and a charcoal filter fumes collection system
C. No treatment involved or necessary

D. Gasoline is transported by authorized fuel transport vehicles
E. Waste gasoline is sold to an oil company for recycling.

IX. Oily waste
A. Oily waste is collected by means of heavy-duty equipment that pick up the dirt laid on the yard for the absorption of oils. Absorbent used is swept up and placed in metal containers. Oily rags are picked up throughout the yard shops and work areas.
B. All oily materials are stored in covered, metal containers.
C. No treatment involved or necessary
D. Transported by disposal companies
E. Oily waste disposal companies are contracted to pick up and dispose of materials.

X. Rubbish
A. Rubbish is collected throughout the yard and from vehicles purchased.
B. Stored in roll-off trash bins
C. No treatment involved or necessary
D. Transported by rubbish collecting company
E. Transported to local dump by rubbish hauling company

32. CCHS, refers to and incorporates by reference its response to Question No. 29, above, and in particular, subcategory B therein.

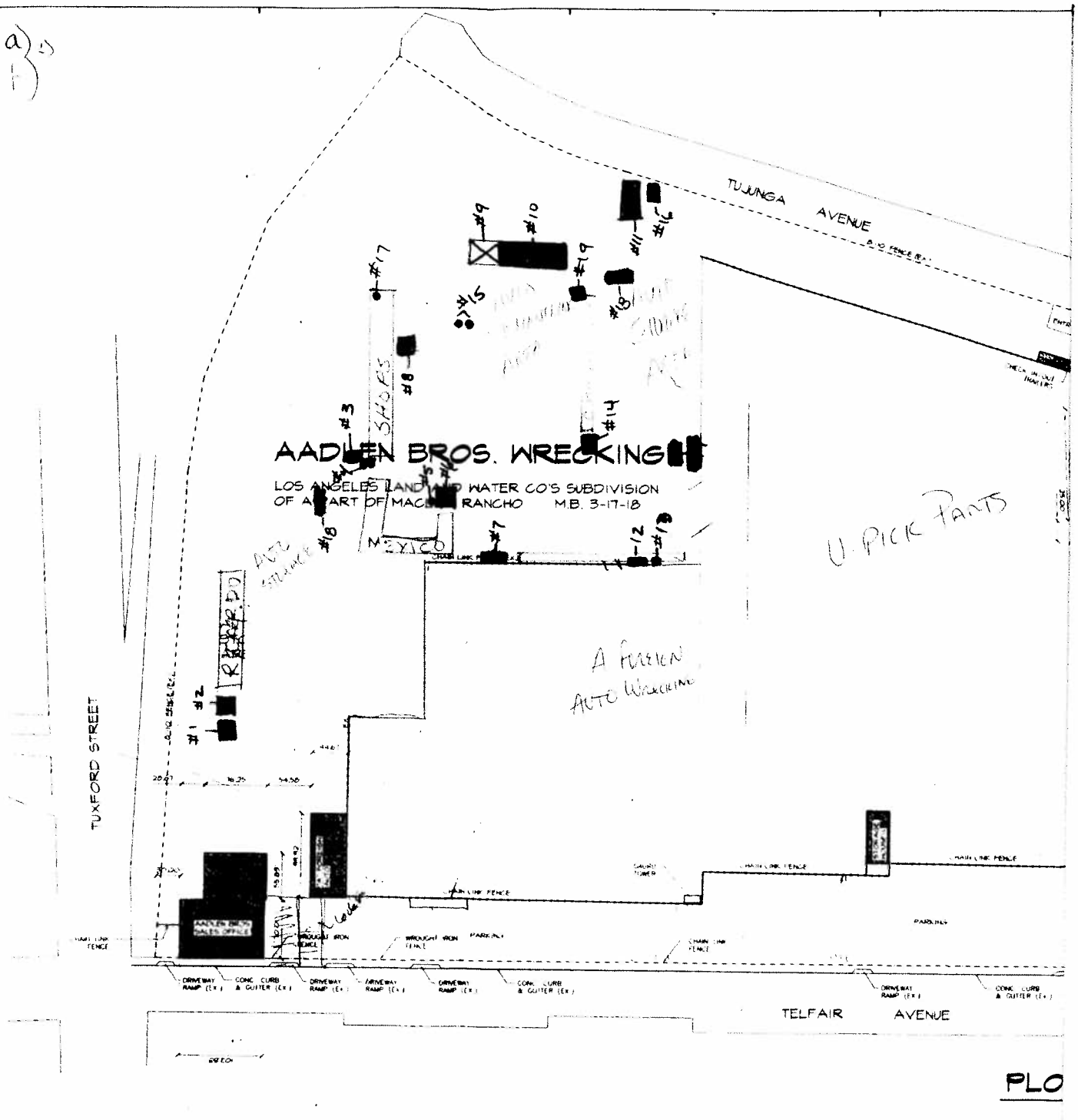
Very truly yours,

EZER WILLIAMSON & BROWN LLP

By: Richard E. Williamson

REW:eac
cc: California Car Hikers Service, Attn: Nathan B. Adlen, President
U:\Documents\Adlen\EPA\Correspondence\Massey 061906.wpd

Exhibit 1


TUJUNGA AVENUE
AADLEN BROS. WRECKING
LOS ANGELES LAND AND WATER CO'S SUBDIVISION
OF A PART OF MACLAY RANCHO M.B. 3-17-18
MEXICO
U-PICK PARTS
A FRIEDEN AUTO WRECKING
TUXFORD STREET
TELFAIR AVENUE
#1
#2
#3
#4
#5
#6
#7
#8
#9
#10
#11
#12
#13
#14
#15
#16
#17
#18
#19
SHOES
CHAIN LINK FENCE
WROUGHT IRON FENCE
PARKING
DRIVEWAY RAMP (EX.)
CONC. CURB & GUTTER (EX.)

PLO

#1 - Antifreeze Storage tank - 546 Gal. Cap.
#2 - Waste Oil storage tank - 546 Gal Cap.
#3 - Waste Oil Drain site (Bobby Sanders) 150 Gal
#4 - Antifreeze Drain site (Bobby Sanders) 55gal drum x2
#5 - Antifreeze Drain site (Mexico Motors) 55gal drum
#6 - Waste Oil Drain/storage (Mex. Motors) 546Gal Cap
#7 - Waste Oil storage tank - (Outside A.U) 1100Gal. Cap
#8 - Waste Oil storage Tank - (Shops) 546 Gal Cap.
#9 - Waste Oil Storage Tank - Not in Use. 1100 Gal Cap
#10 - Waste Gasoline storage Tank - 5000 Gal Cap
#11 - Waste Oil storage tank - (Bust Out) 500 Gal Cap.
#12 - Waste Gasoline Extraction Unit
#13 - Waste Oil Drain tank - 200-300 gal cap.
#14 - Waste oil Drain site - (Cutting Area)
#15 - Brake Fluid storage (Cores Area) 50 gal
#16 - Battery storage - for recycling Drum X2
#17 - Mercury switch storage
#18 - Rubbish storage (Boxes)
- Waste oil
- Waste gas
- Antifreeze
#15 - Brake Fluid
- Battery storage
- #17 - Mercury Switches
- Rubbish
#19 - Oily Waste

C.D.S. CONSTRUCTION DESIGN SERVICE

PLOT PLAN
FOR AADLEN BROS AUTO WRECKING
AT 11540 TUXFORD STREET
SUN VALLEY CA 91352

A01

PENROSE STREET

T PLAN

Exhibit 2

2) [illegible]

3) 1) BUILDINGS

A. AADLEN BROTHERS AUTO WRECKING
SALES OFFICE - BUILT 1964, added 1991

B AADLEN BROTHERS AUTO WRECKING
- ADMINISTRATIVE OFFICES - SINCE 1971 (WEST ADDITION SINCE 1990)

C RENTALS - GLASS SHOP, TIRE
SHOP - BUILT 1971

2) OFFICE TRAILERS (ACCESS)

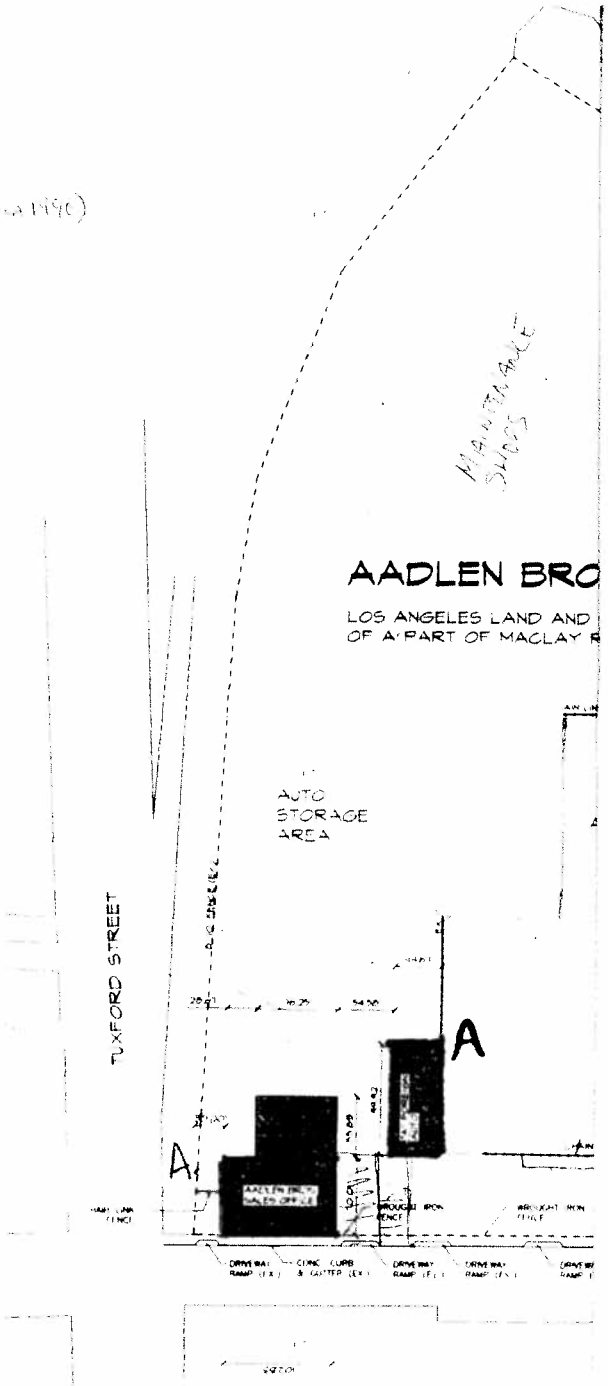
4. A FEDERAL AUTO WRECKING
SALES OFFICE - SINCE 1955

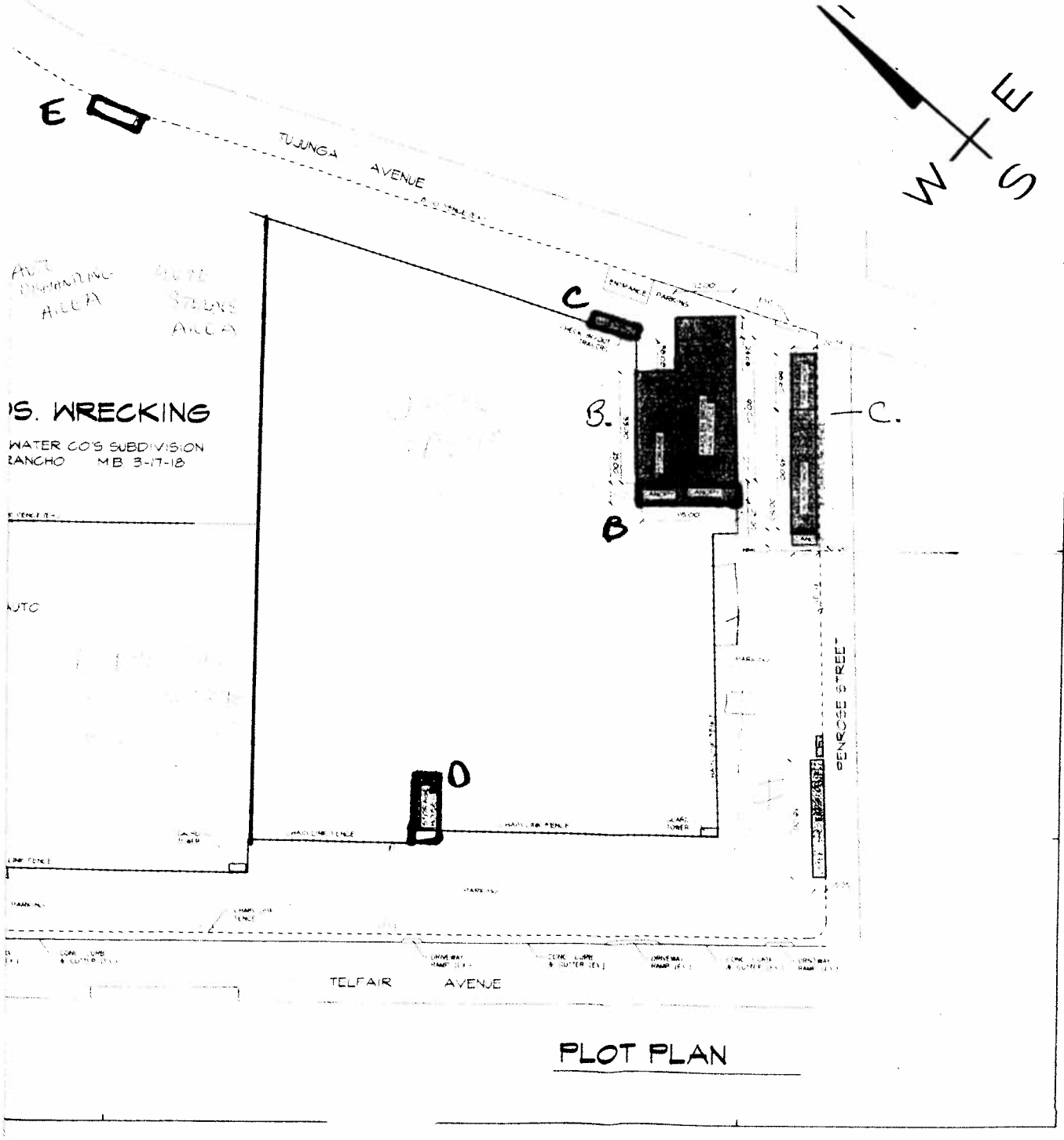
B OFFICE TRAILER - SALES OFFICE - SINCE 1955

C CHECK-IN OFFICE - SINCE 1955

D RENTAL - TRUCK PARKING OFFICE SINCE 1955

E YARD FOREMAN OFFICE - SINCE 1955





PLOT PLAN

C.D.S.
CONSTRUCTION DESIGN SERVICE

PLOT PLAN
FOR AADLEN BROS AUTO WRECKING
AT 11590 TUXFORD STREET
SUN VALLEY CA 91352

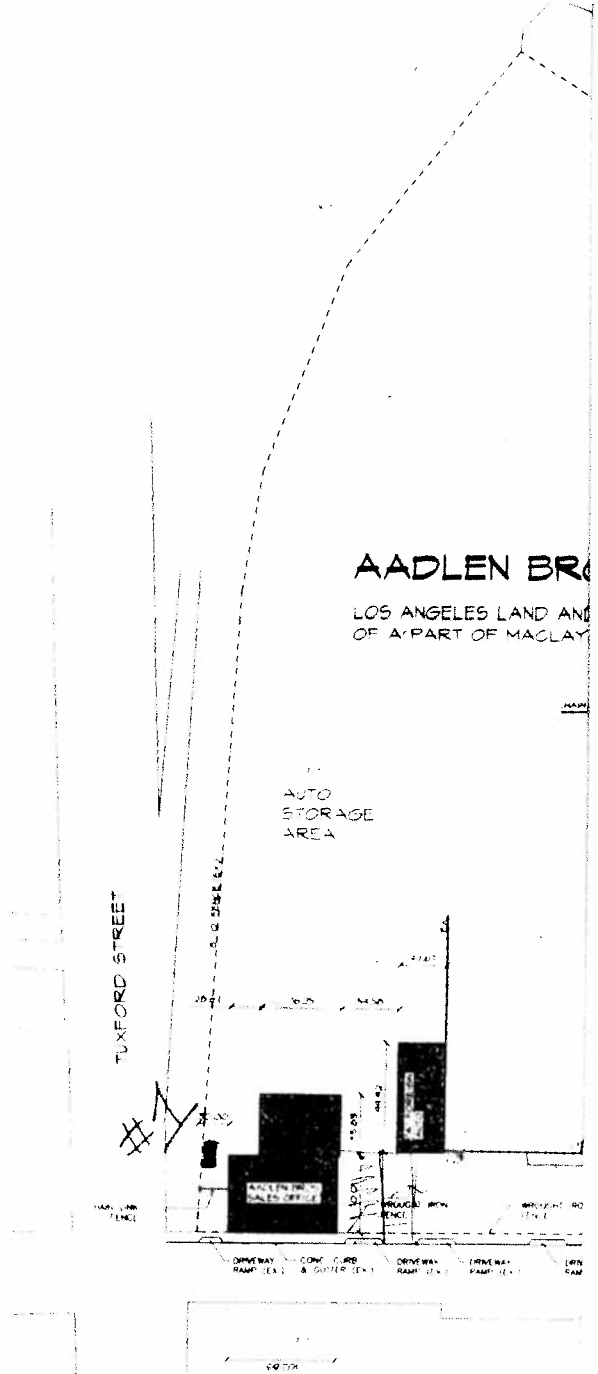
A01

Exhibit 3

20 b) [illegible] - Tenant (since 1955) non previous.

All stormwater runs south by southeast running off on Penrose St

20 c) #1 (ABANDONED) STORAGE TANK (10,000 gal) REMOVED AND AREA BACKFILLED 1991/1992



CONSTRUCTION DESIGN SERVICES

PLOT PLAN
FOR AADLEN BROS AUTO WRECKING
AT 11540 TUXFOR STREET
SUN VALLEY CA 91352

A01

Exhibit 4

(19051-012649-6)

ON YOUR CHECK.
THANK YOU FOR YOUR PROMPT PAYMENT.

SEND PAYMENT TO:

LAFD
UNIFIED PROGRAM, FILE 55643
LOS ANGELES, CA 90074-5643

Business Name: ADLEN BROS AUTO WRECKING
Invoice No: 2002/03-002412-9
AMOUNT DUE: $1,230.50
Facility ID: 19051-012649-6

AMOUNT ENCLOSED: _____

THANK YOU

FOR QUESTIONS REGARDING THIS PERMIT INVOICE.
PLEASE CALL (213) 485-8080.

THIS CHECK IS DELIVERED FOR PAYMENT ON THE FOLLOWING ACCOUNTS			
DATE		AMOUNT	
JUL 2 9 2002			
Facility ID # 19051-012649-6			
Haz waste ID# 0437003			
Invoice# 2002/03-0024 12			
		1230	50

AADLEN BROS
AUTO WRECKING
11590 TUXFORD
SUN VALLEY, CA 91352

30839

DATE JUL 2 9 2002

16-1606/1220

PAY TO THE ORDER OF City of Los Angeles Fire Dept. $ 1230.50

$1,230.50 DOLLARS

CITY NATIONAL BANK
Glendale
818-265-5620
550 North Brand Blvd., Suite 100
Glendale, California 91203

Samuel Lewis MP

FX-4: CBI/Trade Secret

FIRE PREVENTION BUREAU
TECHNICAL SECTION
FIRE DEPARTMENT
200 NORTH MAIN STREET, ROOM 970
LOS ANGELES, CA 90012

Los Angeles
Certified Unified Program Agency
Los Angeles
Fire Department

INVOICE

(FISCAL YEAR 2002/2003)

24 100-002200 0207 1

Mailing Address: ADLEN BROS AUTO WRECKING
11590 W TUXFORD ST
SUN VALLEY, CA 91352-3112

Invoice No: 2002/03-002412-9
Invoice Date: JULY 16, 2002

DUE DATE: **AUGUST 15, 2002**
Delinquent Date: SEPTEMBER 14, 2002
Facility ID: 19051-012649-6
Haz Waste ID No: W437003

Business Name & Address:
ADLEN BROS AUTO WRECKING
11590 W TUXFORD ST
LOS ANGELES, CA 91352

PROGRAM ELEMENT	PERMIT DESCRIPTION	ELEMENT CODE	FEE
HAZMAT	BUSINESS PLAN & INVENTORY (4-7 CHEMICALS)	802	
	CITY OF LOS ANGELES FEES SUBTOTAL:		$460.00
Z WASTE	20-100 EMPLOYEES	101	$460.00
	COUNTY OF LOS ANGELES FEES SUBTOTAL:		$753.00
	CERTIFIED UNIFIED PROGRAM AGENCY FEES TOTAL:		$753.00
GENERAL	SERVICE CHARGE		$1,213.00
	STATE OF CALIFORNIA SERVICE CHARGES SUBTOTAL:		$17.50
	TOTAL DUE:		$17.50
			$1,230.50

Ck#30839
city
7-30-02

NALTY OF 50% OF THE TOTAL AMOUNT DUE IS ADDED ON SEPTEMBER 14, 2002

TECHNICAL SECTION
FIRE DEPARTMENT
200 NORTH MAIN STREET, ROOM 970
LOS ANGELES, CA 90012

Busin Name & Address:
ADLEN BROS AUTO WRECKING
11590 W TUXFORD ST
LOS ANGELES, CA 91352

19 100-000790 0208 1

Mailing Address: ADLEN BROS AUTO WRECKING
11590 W TUXFORD ST
SUN VALLEY CA 91352-3112

Facility No.: 19051-012649-6

Issue Date: 08/19/2002

Haz Waste ID No: W437003

Los Angeles Certified Unified Program Agency
Los Angeles Fire Department

Hazardous Waste and Hazardous Materials Management Program

CONSOLIDATED PERMIT

Effective: **07/01/2002** to **06/30/2003**

ADLEN BROS AUTO WRECKING

has paid in full the required fee in the amount of **$1,230.50** on **08/02/2002**.

This permit is to be renewed **ANNUALLY**. The following Unified Program element(s) are covered in this permit:

PROGRAM ELEMENT	DESCRIPTION
HAZ MAT	Hazardous Materials Business Plan and Inventory
HAZ WASTE	Hazardous Waste Generator Program
	Los Angeles City Fire Code Division 4: Hazardous Materials**

**Division 4 Permit is issued based on the condition that the facility is in compliance with all applicable rules, regulations and laws pertaining to Division 4 Hazardous Materials. THIS PERMIT IS NONTRANSFERABLE AND IS VOID UPON CHANGE IN OWNERSHIP OR LOCATION. YOU MAY CONTINUE TO OPERATE UNDER THE FY 2002/2003 CONSOLIDATED PERMIT UNTIL SEPTEMBER 1, 2003, IF YOU MEET THE DEADLINES FOR PAYMENT FOR THE NEXT FISCAL YEAR AND MEET ALL OTHER REQUIREMENTS.

BY: William R. Bamattre
William R. Bamattre
Fire Chief

The Consolidated Permit must be posted at the facility for review at all times.

See reverse side for conditions.

Please notify the City of Los Angeles Fire Department, Technical Section of any change to ownership and location.
Address: 200 N. Main Street, Room 970; Los Angeles, CA 90012. Telephone: 213-485-8080.

FIRE PREVENTION BUREAU
TECHNICAL SECTION
FIRE DEPARTMENT
200 NORTH MAIN STREET, ROOM 970
LOS ANGELES, CA 90012

Facility No.:	19051-0012649
Issue Date:	09/01/2003
Haz Waste ID No:	AR0026650
Active Sites:	1 OF 3

02 100-000460 0309 1

Business Name: ADLEN BROS AUTO WRECKING
Mailing Address: 11590 W TUXFORD ST
SUN VALLEY CA 91352-3112

Los Angeles Certified Unified Program Agency
Los Angeles Fire Department

Hazardous Waste and Hazardous Materials Management Program

CONSOLIDATED PERMIT

Effective: 07/01/2003 to 06/30/2004
ADLEN BROS AUTO WRECKING - Site Address: 11590 W TUXFORD ST, LOS ANGELES, CA 91352
Owned By: NATE ALDEN
has paid in full the required fee in the amount of $1,288.50 on 08/26/2003.
This Permit is to be renewed ANNUALLY. The following Unified Program element(s) are covered in the permit.

PROGRAM ELEMENT	DESCRIPTION
HAZ MAT	Hazardous Materials Business Plan and Inventory
HAZ WASTE	Hazardous Waste Generator Program
	Los Angeles City Fire Code Division 4: Hazardous Materials**

**Division 4 Permit is issued based on the condition that the facility is in compliance with all applicable rules, regulations and laws pertaining to Division 4 Hazardous Materials.

Status of all program elements listed above (unless otherwise indicated): **PERMITTED**

THIS PERMIT IS NONTRANSFERABLE AND IS VOID UPON CHANGE IN OWNERSHIP OR LOCATION. YOU MAY CONTINUE TO OPERATE UNDER THE FY 2003/2004 CONSOLIDATED PERMIT UNTIL SEPTEMBER 1, 2004, IF YOU MEET THE DEADLINES FOR PAYMENT FOR THE NEXT FISCAL YEAR AND MEET ALL OTHER REQUIREMENTS.

BY: William R. Bamattre
William R. Bamattre
Fire Chief

The Consolidated Permit must be posted at the facility for review at all times.

See 2nd page for conditions.

Please notify the City of Los Angeles Fire Department, Technical Section of any change to ownership and location.
Address: 200 N. Main Street, Room 970; Los Angeles, CA 90012. Telephone: 213-485-8080.

FIRE PREVENTION BUREAU
TECHNICAL SECTION
FIRE DEPARTMENT
200 NORTH MAIN STREET, ROOM 970
LOS ANGELES, CA 90012

Facility No.:	19051-0012649
Issue Date:	09/01/2003
Haz Waste ID No:	AR0026650
Active Sites:	2 OF 3

02 100-000461 0309 1

Business Name: ADLEN BROS AUTO WRECKING
Mailing Address: 11590 W TUXFORD ST
SUN VALLEY CA 91352-3112

Los Angeles Certified Unified Program Agency
Los Angeles Fire Department

Hazardous Waste and Hazardous Materials Management Program

CONSOLIDATED PERMIT

Effective: 07/01/2003 to 06/30/2004
ADLEN BROS AUTO WRECKING - Site Address: 8520 N TELFAIR AV, LOS ANGELES, CA 91352
Owned By: NATE ALDEN
has paid in full the required fee in the amount of $1,288.50 on 08/26/2003.
This Permit is to be renewed ANNUALLY. The following Unified Program element(s) are covered in the permit.

PROGRAM ELEMENT	DESCRIPTION
HAZ MAT	Hazardous Materials Business Plan and Inventory
HAZ WASTE	Hazardous Waste Generator Program
	Los Angeles City Fire Code Division 4: Hazardous Materials**

**Division 4 Permit is issued based on the condition that the facility is in compliance with all applicable rules, regulations and laws pertaining to Division 4 Hazardous Materials.

Status of all program elements listed above (unless otherwise indicated): **PERMITTED**

THIS PERMIT IS NONTRANSFERABLE AND IS VOID UPON CHANGE IN OWNERSHIP OR LOCATION. YOU MAY CONTINUE TO OPERATE UNDER THE FY 2003/2004 CONSOLIDATED PERMIT UNTIL SEPTEMBER 1, 2004, IF YOU MEET THE DEADLINES FOR PAYMENT FOR THE NEXT FISCAL YEAR AND MEET ALL OTHER REQUIREMENTS.

BY: William R. Bamattre
William R. Bamattre
Fire Chief

The Consolidated Permit must be posted at the facility for review at all times.

See 2nd page for conditions.

Please notify the City of Los Angeles Fire Department, Technical Section of any change to ownership and location.
Address: 200 N. Main Street, Room 970; Los Angeles, CA 90012. Telephone: 213-485-8080.

FIRE PREVENTION BUREAU
TECHNICAL SECTION
FIRE DEPARTMENT
200 NORTH MAIN STREET, ROOM 970
LOS ANGELES, CA 90012

Facility No.:	19051-0012649
Issue Date:	09/01/2003
Haz Waste ID No:	AR0026650
Active Sites:	3 OF 3

02 100-000462 0309 1

Business Name: ADLEN BROS AUTO WRECKING
Mailing Address: 11590 W TUXFORD ST
SUN VALLEY CA 91352-3112

Los Angeles Certified Unified Program Agency
Los Angeles Fire Department

Hazardous Waste and Hazardous Materials Management Program

CONSOLIDATED PERMIT

Effective: 07/01/2003 to 06/30/2004
ADLEN BROS AUTO WRECKING - Site Address: 11409 W PENROSE ST, LOS ANGELES, CA 91352
Owned By: NATE ALDEN
has paid in full the required fee in the amount of $1,288.50 on 08/26/2003.
This Permit is to be renewed ANNUALLY. The following Unified Program element(s) are covered in the permit.

PROGRAM ELEMENT	DESCRIPTION
HAZ MAT	Hazardous Materials Business Plan and Inventory
HAZ WASTE	Hazardous Waste Generator Program
	Los Angeles City Fire Code Division 4: Hazardous Materials**

**Division 4 Permit is issued based on the condition that the facility is in compliance with all applicable rules, regulations and laws pertaining to Division 4 Hazardous Materials.

Status of all program elements listed above (unless otherwise indicated): **PERMITTED**

THIS PERMIT IS NONTRANSFERABLE AND IS VOID UPON CHANGE IN OWNERSHIP OR LOCATION. YOU MAY CONTINUE TO OPERATE UNDER THE FY 2003/2004 CONSOLIDATED PERMIT UNTIL SEPTEMBER 1, 2004, IF YOU MEET THE DEADLINES FOR PAYMENT FOR THE NEXT FISCAL YEAR AND MEET ALL OTHER REQUIREMENTS.

BY: William R. Bamattre
William R. Bamattre
Fire Chief

The Consolidated Permit must be posted at the facility for review at all times.

See 2nd page for conditions.

Please notify the City of Los Angeles Fire Department, Technical Section of any change to ownership and location.
Address: 200 N. Main Street, Room 970; Los Angeles, CA 90012. Telephone: 213-485-8080.

FIRE PREVENTION BUREAU
TECHNICAL ACTION
FIRE DEPARTMENT
200 NORTH MAIN STREET, ROOM 970
LOS ANGELES, CA 90012

Angeles
Certified Unified Program Agency
Los Angeles
Fire Department

INVOICE

(FISCAL YEAR 2003/2004)

08 100-002096 0307 1

Mailing Address: ADLEN BROS AUTO WRECKING
11590 W TUXFORD ST
SUN VALLEY CA 91352-3112

Invoice No: 2003/04-002308-6
Invoice Date: JULY 08, 2003

DUE DATE: **AUGUST 07, 2003**
Delinquent Date: SEPTEMBER 06, 2003
Facility ID: 19051-0012649
Haz Waste ID No: AR0026650

Business Name & Address:
ADLEN BROS AUTO WRECKING
11590 W TUXFORD ST
LOS ANGELES, CA 91352

PROGRAM ELEMENT	PERMIT DESCRIPTION	ELEMENT CODE	FEE
HAZMAT	BUSINESS PLAN & INVENTORY (4-7 CHEMICALS)	802	$460.00
	CITY OF LOS ANGELES FEES SUBTOTAL:		$460.00
HAZ WASTE	20-100 EMPLOYEES	101	$811.00
	COUNTY OF LOS ANGELES FEES SUBTOTAL:		$811.00
	CERTIFIED UNIFIED PROGRAM AGENCY FEES TOTAL:		$1,271.00
GENERAL	SERVICE CHARGE		$17.50
	STATE OF CALIFORNIA SERVICE CHARGES SUBTOTAL:		$17.50
	TOTAL DUE:		$1,288.50

Ck# 36162
CITY
7-29-03

ENALTY OF 50% OF THE TOTAL AMOUNT DUE IS ADDED ON SEPTEMBER 06, 2003

Facility	D# 19051 -		
0012649			
Haz Waste ID# AR0026650			
		1288	50

DATE 7-29-2003

PAY TO THE ORDER OF LAFD $1288.50

$1,288.50 DOLLARS

CITY NATIONAL BANK
Glendale
818-265-5620
550 North Brand Blvd., Suite 100
Glendale, California 91203

MP

FX-4: CBI/Trade Secret

DETACH AT PERFORATION ↑ AND RETURN THIS LOWER PORTION OF PERMIT INVOICE AND YOUR PAYMENT MADE PAYABLE TO: CITY OF LOS ANGELES FIRE DEPT.
PLEASE WRITE THE FACILITY ID NUMBER —
(19051-0012649)
ON YOUR CHECK.
THANK YOU FOR YOUR PROMPT PAYMENT.

SEND PAYMENT TO:

LAFD
UNIFIED PROGRAM, FILE 55643
LOS ANGELES, CA 90074-5643

Business Name: ADLEN BROS AUTO WRECKING
Invoice No: 2003/04-002308-6
AMOUNT DUE: $1,288.50
Facility ID: 19051-0012649

AMOUNT ENCLOSED: 1,288 50

THANK YOU

FOR QUESTIONS REGARDING THIS PERMIT INVOICE, PLEASE CALL (213) 485-8080.

THIS CHECK IS DELIVERED FOR PAYMENT ON THE FOLLOWING ACCOUNTS			
DATE		AMOUNT	
JUL 2 9 2003			
Invoice#2003/04-002308-6			
Facility ID#19051 -			
0012649			
Haz Waste ID#AR0026650			
		1288	50

AADLEN BROS
AUTO WRECKING
PH. 818-504-1091
11590 TUXFORD
SUN VALLEY, CA 91352

36162

DATE JUL 2 9 2003

16-1606/1220

PAY TO THE ORDER OF LAFD $1288.50

$1,288.50 DOLLARS

CITY NATIONAL BANK
Glendale
818-265-5620
550 North Brand Blvd., Suite 100
Glendale, California 91203

MP

FX-4: CBI/Trade Secret

FIRE PREVE[illegible]ON BUREAU
TECHNICA[illegible] SECTION
FIRE DEPARTMENT
200 NORTH MAIN STREET, ROOM 1780
LOS ANGELES, CA 90012

2X More

[illegible]os Angeles
Certified Unified Program Agency
Los Angeles
Fire Department

INVOICE

(FISCAL YEAR 2004/2005)

21 100-002019 0407 1

Mailing Address: ADLEN BROS AUTO WRECKING
11590 W TUXFORD ST
SUN VALLEY CA 91352-3112

Invoice No: 2004/05-002213-7
Invoice Date: JULY 20, 2004

DUE DATE: **AUGUST 19, 2004**
Delinquent Date: SEPTEMBER 18, 2004
Facility ID: 19051-0012649
Haz Waste ID No: AR0026650

Business Name & Address:
ADLEN BROS AUTO WRECKING
11590 W TUXFORD ST
LOS ANGELES, CA 91352

PROGRAM ELEMENT	PERMIT DESCRIPTION	ELEMENT CODE	FEE
HAZMAT	BUSINESS PLAN & INVENTORY (4+7 CHEMICALS)	802	
	CITY OF LOS ANGELES FEES SUBTOTAL:		$460.00
HAZ WASTE	20-100 EMPLOYEES	101	$460.00
	COUNTY OF LOS ANGELES FEES SUBTOTAL:		$866.00
	CERTIFIED UNIFIED PROGRAM AGENCY FEES TOTAL:		$866.00
GENERAL	SERVICE CHARGE		$1,326.00
	STATE OF CALIFORNIA SERVICE CHARGES SUBTOTAL:		$24.00
	TOTAL DUE:		$24.00
			$1,350.00

PENALTY OF 50% OF THE TOTAL AMOUNT DUE IS ADDED ON SEPTEMBER 18, 2004

DETACH AT PERFORATION ⬆ AND RETURN THIS LOWER PORTION OF PERMIT INVOICE AND YOUR PAYMENT MADE PAYABLE TO: CITY OF LOS ANGELES FIRE DEPT.
PLEASE WRITE THE FACILITY ID NUMBER —
(19051-0012649)
ON YOUR CHECK.
THANK YOU FOR YOUR PROMPT PAYMENT.

SEND PAYMENT TO:

LAFD
UNIFIED PROGRAM, FILE 55643
LOS ANGELES, CA 90074-5643

Business Name: ADLEN BROS AUTO WRECKING
Invoice No: 2004/05-002213 7
AMOUNT DUE: $1,350.00
Facility ID: 19051-0012649

COUNT CLOSED:

THANK YOU

FOR QUESTIONS REGARDING THIS PERMIT INVOICE, PLEASE CALL (213) 978-3680.

DETACH AT PERFORATION ↑ AND RETURN THIS LOWER PORTION OF PERMIT INVOICE AND YOUR PAYMENT MADE PAYABLE TO: CITY OF LOS ANGELES FIRE DEPT.
PLEASE WRITE THE FACILITY ID NUMBER — (19051-0012649) ON YOUR CHECK.
THANK YOU FOR YOUR PROMPT PAYMENT.

SEND PAYMENT TO:

LAFD
UNIFIED PROGRAM, FILE 55643
LOS ANGELES, CA 90074-5643

Business Name: ADLEN BROS AUTO WRECKING
Invoice No: 2004/05-002213-7
AMOUNT DUE: $1,350.00
Facility ID: 19051-0012649

AMOUNT ENCLOSED: 1350-

THANK YOU

FOR QUESTIONS REGARDING THIS PERMIT INVOICE, PLEASE CALL (213) 978-3680.

THIS CHECK IS DELIVERED FOR PAYMENT ON THE FOLLOWING ACCOUNTS

DATE		AMOUNT	
JUL 2 6 2004			
Invoice# 2004/05-002213-7			
Facility ID# 19051-			
0012649		1350-	

AADLEN BROS
AUTO WRECKING
PH. 818-504-1091
11590 TUXFORD
SUN VALLEY, CA 91352

41383

16-1606/1220

DATE JUL 2 6 2004

PAY TO THE ORDER OF LAFD $1350-

$1,350.00 DOLLARS

CITY NATIONAL BANK
Glendale
818-265-5620
550 North Brand Blvd., Suite 100
Glendale, California 91203

Samuel Lewis MP

FX-4: CBI/Trade Secret

FIRE PREVENTION BUREAU
TECHNICAL S TION
FIRE DEPARTMENT
200 NORTH MAIN STREET, ROOM 1780
LOS ANGELES, CA 90012

Facility No.:	FA0012649
Issue Date:	12/14/2005
Haz Waste ID No:	
Active Sites:	1 OF 1

14 100-001764 0512 1

ADLEN BROS AUTO WRECKING
11590 TUXFORD ST
SUN VALLEY CA 91352-3112

Los Angeles Certified Unified Program Agency
Los Angeles Fire Department

Hazardous Waste and Hazardous Materials Management Program

CONSOLIDATED PERMIT

Effective: 07/01/2005 to 06/30/2006
ADLEN BROS AUTO WRECKING - Site Address: 11590 W TUXFORD ST, SUN VALLEY, CA 91352
Owned By: ADLEN, SAM
has paid in full the required fee in the amount of $265.00 on 09/12/2005.
This Permit is to be renewed ANNUALLY. The following Unified Program element(s) are covered in the permit.

PROGRAM ELEMENT	DESCRIPTION
HAZ WASTE	HW GEN, 20-100 EMPLOYEES
HAZ MAT	HAZ MAT INVENTORY 1 TO 3 CHEMICALS
	Los Angeles City Fire Code Division 4: Hazardous Materials**

*Division 4 Permit is isuued based on the condition that the facility is in compliance with all pplicable rules, regulations and laws pertaining to Division 4 Hazardous Materials.

tatus of all program elements listed above (unless otherwise indicated): **PERMITTED**

HIS PERMIT IS NONTRANSFERABLE AND IS VOID UPON CHANGE IN OWNERSHIP OR LOCATION. YOU MAY CONTINUE TO PERATE UNDER FY 2005/2006 CONSOLIDATED PERMIT UNTIL SEPTEMBER 1, 2006, IF YOU MEET THE DEADLINES FOR AYMENT FOR THE NEXT FISCAL YEAR AND MEET ALL OTHER REQUIREMENTS.

BY: William R. Bamattre
William R. Bamattre
Fire Chief

The Consolidated Permit must be posted at the facility for review at all times.

See 2nd page for conditions.

Please notify the City of Los Angeles Fire Department, Technical Section of any change to ownership and location.
Address: 200 N. Main Street, Room 1780; Los Angeles, CA 90012. Telephone: 213-978-3680.

BUSINESS EMERGENCY RESPONSE PLAN

SINESS NO. : 1154P-5 B INESS NAME: ADLEN AIR AND LAUNDRY

SINESS ADDRESS: 1171 TUJUNGA PHONE: 747 8470

PAGE 1 OF 5

ease answer the following questions clearly. Attachments are acceptable if additional space needed.

OTIFICATION PROCEDURES

he event of a reportable hazardous materials waste or release, or threatened release, your business is required by te law to provide an immediate verbal report to:

THE LOS ANGELES CITY FIRE DEPARTMENT (LAFD) : 911

THE STATE OFFICE OF EMERGENCY SERVICES (OES): 1 (800) 852-7550 OR
1 (916) 427-4341

Who will notify LAFD and OES?

Name SAM ADLEN Title OWNER

Name MILT HOFFMAN Title MANAGER

Does your business have and additional emergency response notification system? YES ☐ NO ☐

f yes, explain:

ie the employee(s) responsible for responding to a release or spill:

ame SAM ADLEN Title OWNER

ame MILT HOFFMAN Title MANAGER

ame _____ Title OTHER

ow will employee(s) become aware of a release or spill? (i.e., by alarm, leak detection device, etc.)

1. Visual observation
2. Verbal notification

there an evacuation plan for your business in the event of a spill or release? YES [X] NO ☐

w will employees be evacuated from your facility?

By using the nearest exit to the exterior and meeting at a predetermined area.

e Only

ID: CCP Insp Sig: ALK Date: 7-6-93

EDICAL ASSISTANCE

st two local emergency medical facilities that will be used:

ame of emergency medical facility:
Maximed Occupational Medical Centers.

ddress: 8100 Sunland Blvd. Phone: (818) 768-8882

me of emergency medical facility:
SIERRA HOSPITAL

ddress: San Fernando Rd. Phone:

EVENTION (Actions your business will take to prevent a hazard from occurring.)

scribe the kinds of hazards associated with the hazardous materials present at your facility.

___ POISON

___ CORROSIVE

___ FLAMMABLE and or COMBUSTIBLE

___ COMPRESSED GASES

at actions would your business take to prevent these hazards from occurring?

1. Good housekeeping
2. By isolating and seperating the products.

at are your safety and storage procedures?

1. All employees are trained in the proper handling of all products.
2. They are familiar with the Material Safety Data Sheets for each product.

MITIGATION (Reduce the Hazard.)

(Actions your business will take to lessen the harm or the damage to persons, property, or the environment, and prevent what has occurred from getting worse or spreading.)

11. What is the immediate response to a leak, spill, fire, explosion, or airborne release at your business?

1. Notify supervisor and other employees.
2. Attempt containment.
3. Call the fire department.
4. Evacuate if necessary.

BATEMENT (What You do to Stop the Hazard.)

How do you stop a release?

Immediatly discontinue the use of the product in question.

How do you clean up a release?

Use absorbents and place in a proper container.

How do you dispose of released materials?

Notify a certified waste hauler.

EMPLOYEE TRAINING

ployee training is designed to teach employees about the following categories:

PART 1 - SAFETY: Handling Hazardous Materials Safely
PART 2 - EMERGENCY CONTACT: Which Emergency Agencies to Contact
PART 3 - EMERGENCY EQUIPMENT AND SUPPLIES: Use of Emergency Cleanup Equipment and Supplies
PART 4 - EVACUATION: Evacuation Procedures

RT 1: SAFETY

Describe the training NEW employees receive in handling and using the hazardous materials and waste that are part of your operation.

Review the Material Safety Data Sheet and this business plan.

How often does REFRESHER training occur?

Annually.

How is this documented?

In writing.

Where is documentation kept?

Filed in the office.

T 2: EMERGENCY CONTACT

re all NEW employees trained to know which emergency response agencies to contact if an emergency occurs?

YES [X] NO [ ]

ho is assigned to contact the emergency response agencies?

ame SAM ADLEN Title OWNER

ame MILT HOFFMAN Title MANAGER

w often does REFRESHER training occur?

Annually.

w is it conducted?

Informal meeting.

at is covered?

Procedure for emergency notification.

ART 3: EMERGENCY EQUIPMENT AND SUPPLIES

How are NEW employees trained in the use of emergency equipment and supplies needed to stop spills, leaks, or fires?

Informal meeting with hands on drill afterwards.

What kinds of equipment and supplies are they taught to use to stop the release?

___ Rubber gloves
___ Goggles/safety glasses
___ Safety container
___ Fire extinguisher
___ Absorbents

How often is REFRESHER training conducted in the use of emergency equipment and supplies?

Annually

Are drills ever conducted? YES [X] NO [ ]

4: EVACUATION

Are new employees given initial training on evacuation procedures? YES [X] NO [ ]

How often is REFRESHER training given on evacuation procedures?

Annually

NOTE: Your business is required by State law to keep a copy of this Business Plan, including the inventory. Describe where this copy is located at your business?

SIGNATURE OF BUSINESS OWNER OR AUTHORIZED REPRESENTATIVE:

DATE: 7-14-97

Exhibit 5

City of LOS ANGELES
CALIFORNIA

LOS ANGELES FIRE DEPARTMENT
200 NORTH MAIN STREET
LOS ANGELES, CA 90012
(213) 978-3680

usiness No.: FA0012649

usiness Name: ADLEN BROS AUTO WRECKING

Jsiness Mailing Address: 11590 W TUXFORD ST
SUN VALLEY, CA 91352

:orage Address: 11590 W TUXFORD ST

Date:

Last Inspection Date:

Permit Date: 07/01/2005

RFI Request No:

RFI Requestor Name:

Chemical & Ingredients	Haz. Mat. Type	Max. Qnt on hand:	Yearly Qnt	Product Storage Type	Physical State
GASOLINE	2	6000			L
-					
-		0	0		
HYDRAULIC OIL	2	55			L
-					
-		0	0		
OXYGEN	1	1800	2800		G
-					
-		0	0		

City of LOS ANGELES
CALIFORNIA

LOS ANGELES FIRE DEPARTMENT
200 NORTH MAIN STREET
LOS ANGELES, CA 90012
(213) 978-3680

usiness No.: FA0012649

usiness Name: ADLEN BROS AUTO WRECKING

usiness Mailing Address: 11590 W TUXFORD ST
SUN VALLEY, CA 91352

torage Address: 11590 W TUXFORD ST

Date:

Last Inspection Date:

Permit Date: 07/01/2005

RFI Request No:

RFI Requestor Name:

Chemical & Ingredients	Haz. Mat. Type	Max. Qnt on hand:	Yearly Qnt	Product Storage Type	Physical State
WASTE OIL	3	500			L
-					
-		0	0		
OPANE					
	1	400	3000		G
-					
-		0	0		
GASOLINE					
	2	6000			L
-					
-		0	0		

City of LOS ANGELES
CALIFORNIA

LOS ANGELES FIRE DEPARTMENT
200 NORTH MAIN STREET
LOS ANGELES, CA 90012
(213) 978-3680

siness No.: FA0012649

siness Name: ADLEN BROS AUTO WRECKING

siness Mailing Address: 11590 W TUXFORD ST
SUN VALLEY, CA 91352

rage Address: 11590 W TUXFORD ST

Date:

Last Inspection Date: 09/08/2003
Permit Date: 07/01/2005

RFI Request No:

RFI Requestor Name:

hemical & Ingredients	Haz. Mat. Type	Max. Qnt on hand:	Yearly Qnt	Product Storage Type	Physical State
HYDRAULIC OIL	2	55			L
		0	0		
OXYGEN	1	1800	2800		G
		0	0		
WASTE OIL	3	500			L
		0	0		

City of LOS ANGELES
CALIFORNIA

LOS ANGELES FIRE DEPARTMENT
200 NORTH MAIN STREET
LOS ANGELES, CA 90012
(213) 978-3680

iness No.: FA0012649

iness Name: ADLEN BROS AUTO WRECKING

iness Mailing Address: 11590 W TUXFORD ST
SUN VALLEY, CA 91352

'age Address: 11590 W TUXFORD ST

Date:

Last Inspection Date: 09/08/2003

Permit Date: 07/01/2005

RFI Request No:

RFI Requestor Name:

emical & Ingredients	Haz. Mat. Type	Max. Qnt on hand:	Yearly Qnt	Product Storage Type	Physical State
PANE	1	400	3000		G
		0	0		

Exhibit 6

Material Safety Data Sheets

(MSDS)

Morton

MSDS Number 0083
Revision 1
January 12, 1996

MATERIAL SAFETY DATA SHEET
MORTON AUTOMOTIVE SAFETY PRODUCTS

1. CHEMICAL PRODUCT AND CHEMICAL IDENTIFICATION

Chemical Product Name ..... AIRBAG INFLATOR (DL-Z113)

Common Chemical Name ..... See ingredients list in section 2

Synonyms ..... Airbag Gas Generator

Product Code ..... MSDS No. 0083

Supplier ..... MORTON INTERNATIONAL, INC.
AUTOMOTIVE SAFETY PRODUCTS
Attn: Morton ASP HazCom Coordinator, M/S M9630
3350 Airport Rd.
Ogden, UT 84405 USA

Morton ASP (24 Hour) ..... (801) 734-6835

Chemtrec USA
(Emergency) ..... (800) 424-9300

Chemtrec Int.
(Emergency) ..... (001 - 202) 483-7616

2. TYPICAL COMPOSITION

Ingredients	Passenger	CAS No. †	OSHA-PEL ×	ACGIH-TLV ✚
Aluminum container	75-84%	NA*	NA	NA
DL-Z113 gas generant	16-25%	NA	NA	NA

† Chemical Abstracts Service Number
× Occupational Safety and Health Administration - Permissible Exposure Limit
✚ American Conference of Governmental Industrial Hygienists - Threshold Limit Value
* Not applicable due to form

3. HAZARDS IDENTIFICATION

****

EMERGENCY OVERVIEW

The tamper resistant, sealed metal container poses no health hazard. If the container is damaged prior to firing, a potential for exposure to gas generant exists. Effects of overexposure to the gas generant containing sodium azide (i.e., inhalation of dust, or direct dermal or oral contact with gas generant tablets or wafers) is likely if the sealed container is ruptured prior to firing.

NOTE: ***If the inflator is ruptured and gas generant is present, see Morton ASP MSDS # 0001, Airbag Inflator Generant (DL-Z113) for applicable information.***

****

POTENTIAL HEALTH EFFECTS

ROUTE(S) OF ENTRY ..... None expected, when used as intended

HUMAN HEALTH EFFECTS AND SYMPTOMS OF OVEREXPOSURE

EFFLUENT GASES ..... Use approved engineering controls to minimize exposure to effluent gases. Use approved personal protective equipment when engineering controls are not adequate or have not been implemented. When handling units repeatedly, a residue may accumulate on hands. Wear appropriate gloves to prevent contact with skin.

INHALATION ..... None expected, when used as intended
SKIN CONTACT ..... None expected, when used as intended
EYES ..... None expected, when used as intended
INGESTION ..... None expected, when used as intended

CARCINOGENICITY ..... The ingredients of this product are not listed as carcinogens by the NTP (National Toxicology Program), not regulated as carcinogens by OSHA (Occupational Safety and Health Administration), and have not been evaluated by IARC (International Agency for Research on Cancer) or ACGIH (American Conference of Governmental Hygienists).

MEDICAL CONDITIONS
AGGRAVATED BY EXPOSURE .. None expected, when used as intended

4. FIRST AID MEASURES

INHALATION ..... None expected, when used as intended
EYES/SKIN ..... None expected, when used as intended
INGESTION ..... None expected, when used as intended

5. FIRE FIGHTING MEASURES

FLASH POINT ..... Not applicable
AUTO IGNITION TEMP ..... Greater than 300°F (149°C)
EXPLOSION LIMITS ..... Not applicable

EXPLOSION HAZARD ..... Sealed containers will not fire unless heated to temperatures above 300°F (149°C) or configured for electrical ignition. Static discharge impact, friction and heat may ignite exposed generant tablets or wafers.

5. FIRE FIGHTING MEASURES CONTINUED

EXTINGUISHING MEDIA ..... Fires involving sealed units may be fought with any standard extinguishing medium, including water.

SPECIAL FIRE FIGHTING PROCEDURES ..... This device will be activated by extended exposures to temperatures above 300°F (149°C) and when activated, produces nitrogen and small amounts of carbon dioxide, carbon monoxide and nitric oxide. Hydrogen sulfide, sodium sulfide, hydrogen gas and very small quantities of hydrazoic acid may evolve from damaged or ruptured units after fire is out. Fire should be fought at safe distance. If in confined area, protect surrounding structures. This mixture burns extremely rapidly and produces a large volume of nitrogen gas, trace amounts of carbon dioxide, carbon monoxide and nitric oxide. Fires involving large quantity of inflators should only be fought by trained fire fighters wearing a self-contained breathing apparatus with full face piece in positive pressure mode.

6. ACCIDENTAL RELEASE MEASURES

SPILL AND LEAK PROCEDURES ..... If an inflator is ruptured prior to firing and a potential exists for exposure to the gas generant tablets or wafers inside this unit:

* Evacuate non-essential personnel from the immediate spill area
* Eliminate all sources of ignition
* Cleanup and handling of inflator chemicals should be conducted by personnel properly trained and authorized to handle this material
* Use non-sparking tools for cleanup

7. HANDLING AND STORAGE

STORAGE TEMPERATURE ..... Ambient (less than 176°F [80°C])
SHELF LIFE ..... 10 years
HANDLING AND STORAGE PRECAUTIONS ..... Inspect unit for damage following shipment and prior to installation. Do not immerse damaged inflator in water. Immersed generant material may form hydrazoic acid. Store damaged or defective units in dry place, in limited quantities.

8. EXPOSURE CONTROLS/PERSONAL PROTECTION

EFFLUENT GASES ..... Use approved engineering controls to minimize exposure to effluent gases. Use approved personal protective equipment when engineering controls are not adequate or have not been implemented. When handling units repeatedly, a residue may accumulate on hands. Wear appropriate gloves to prevent contact with skin.

EYE PROTECTION ..... None required, when used as intended
SKIN PROTECTION ..... None required, when used as intended
RESPIRATORY/VENTILATION REQUIREMENTS ..... None required, when used as intended
EXPOSURE LIMITS ..... None required, when used as intended

9. PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL FORM	Sealed metallic canister
COLOR	Gray/black
ODOR	None
BOILING POINT	Not applicable
MELT POINT/FREEZE POINT	Not applicable
PH	Not applicable
SOLUBILITY IN WATER	For chemicals within unit: 40%
SPECIFIC GRAVITY	Not applicable
% VOLATILE BY WEIGHT	Not applicable
VAPOR PRESSURE	Not applicable
VAPOR DENSITY	Not applicable
BULK DENSITY	Not applicable
COEFFICIENT OF WATER/ OIL DISTRIBUTION	Not applicable
EVAPORATION RATE	None

10. STABILITY AND REACTIVITY

STABILITY	Sealed unit is stable when used as designed
HAZARDOUS POLYMERIZATION	None
INCOMPATIBILITIES	A ruptured unit contains chemicals incompatible with organic and inorganic acids, heavy metals, metal salts and halogens. Acidified sodium azide solutions will release hydrazoic acid. Hydrazoic acid will react with heavy metals, including copper, lead, mercury and silver forming sensitive primary explosives.
DECOMPOSITION PRODUCTS	Nitrogen, sodium sulfide, molybdenum nitride and small amounts of oxides of carbon and nitrogen.

11. TOXICOLOGICAL INFORMATION

INHALATION	Not applicable in present form
INGESTION	Not applicable in present form
SKIN & EYE IRRITATION	Not applicable in present form
MUTAGENICITY	Not applicable in present form

12. ECOLOGICAL INFORMATION

Not available.

13. DISPOSAL CONSIDERATIONS

Contents of this inflator have minimal toxic properties. If inflator is not defective, remote firing is recommended prior to disposal procedures. Dispose of or reclaim in accordance with federal, state and local regulations. Damaged, unfired inflators should be referred to a manufacturer for disposal. Morton will accept their inflators back for recycling purposes. Refer to Morton ASP Inflator Recycling Policy.

14. TRANSPORTATION INFORMATION

D.O.T SHIPPING NAME ..... Airbag Inflators; Airbag Modules
UN NUMBER 3268
D.O.T. HAZARD CLASS 9
ADR/RID SHIPPING NAME ..... Articles, pyrotechnic
ADR/RID CLASS ..... 1.4S (Driver); 1.4G (Passenger)
IMDG CLASS 9
IATA CLASS 9

15. REGULATORY INFORMATION

I. TSCA STATUS

All components comply with TSCA requirements.

II. SARA INFORMATION

a. **Hazardous Substance Reportable Quantities, 40 CFR 302.4** ..... Not applicable

b. **Extremely Hazardous Substances Reportable Quantities, 40 CFR 355 Appendix A** ..... Not applicable

c. **Threshold Planning Quantities for Extremely Hazardous Substances, 40 CFR 355 Appendix A** ..... Not applicable

d. **Toxic Chemicals, SARA Sec. 313** ..... To the best of our knowledge SARA reporting is not applicable due to the article status of this product, however, if this product is dismantled reporting may be necessary. Please refer to Morton ASP MSDS #0001, Airbag Inflator Generant (DL-Z113) for applicable reporting information.

e. **Chemical Category as required by SARA Sec.313, 40 CFR 372.65** ..... Not applicable

f. **Hazard Category for SARA Sec. 311/312 Reporting** ..... Not applicable

III. RCRA INFORMATION

To the best of our knowledge there are no RCRA regulations that apply to this article. However, all federal, state and local regulations should be reviewed prior to disposal.

16. OTHER INFORMATION

The environmental, health and safety information contained herein is given in compliance with statutory obligations and relates only to the substance/preparation described in this material safety data sheet. This material safety data sheet is provided for information only, and is not intended to create or imply any representation, agreement, or warranty, whether express or implied, except to the extent required by applicable law. The environmental, health and safety information contained herein is believed to be accurate based on our current knowledge; however, it remains the sole responsibility of the customer to provide a safe workplace and to comply with all applicable laws and regulations. Nothing contained herein is to be construed as a recommendation for use in violation of any patent or of applicable laws or regulations.

HMIS by NPCA Criterion
In present form the following ratings apply:

Health	0
Flammability	0
Reactivity	0
PPE	X

ACRONYMS

ANSI	American National Standards Institute
ASP	Automotive Safety Products
CERCLA	Comprehensive Environmental Response, Compensation & Liability Act
HMIS	Hazardous Material Identification System
IATA	International Air Transport Association
IMDG	International Maritime Dangerous Goods Code
NPCA	National Paint and Coatings Association
RCRA	Resource Conservation and Recovery Act
SARA	Superfund Amendments and Reauthorization Act
TSCA	Toxic Substances Control Act

HISTORY

REASON FOR ISSUE	Revision of MSDS #0083 and elimination of MSDS #D004
PREPARED BY	Frank Casperson
TITLE	Sr. Industrial Hygienist
APPROVED BY	Frank Casperson
APPROVAL DATE	January 12, 1996
APPROVED BY	Effluent and Disposal Committee
APPROVAL DATE	January 12, 1996
SUPERSEDES DATE	February 14, 1995 (Rev. N/ C) & February 25, 1992 (D004)
SUPERSEDES NUMBER	Revision N/C and MSDS # D004

This document conforms to the ANSI Z400.1-1993 MSDS format

b) antifreeze

MATERIAL SAFETY
DATA SHEET

Material Name
Quaker State Autoguard Antifreeze/Coolant

Issue Date: 07/27/1995
MSDS No.: QS-085

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Chemical Name: Mixture
Internal Part No.: Order No. 69113 (6/1 gallon); 69110 (55 gallon drum)
Product Use: Antifreeze in heating and cooling systems

Manufacturer Information
Quaker State Corporation
225 E. John Carpenter Freeway
Irving, Texas 75062
----PHONE #: (800)562-5928
EMERGENCY #: (214)868-0416
Mfg. Part #

Supplier Information
Sup. Part #

Synonyms: Ethylene Glycol

Section 2 - COMPOSITION / INFORMATION ON INGREDIENTS

CAS #	Components	% Vol
107-21-1	Ethylene Glycol	>95
11130-12-4	Sodium Borate Pentahydrate	<1
7632-00-0	Sodium Nitrite	<1
6834-92-0	Sodium Metasilicate	<0.5
1310-73-2	Sodium Hydroxide	<0.5
7631-99-4	Sodium Nitrate	<0.5

Component Information/Information on Non-Hazardous Components
Other components are non-hazardous using the criteria established in 29 CFR 1910.1200 (Hazard Communication).

Section 3 - HAZARDS IDENTIFICATION

Emergency Overview
This product is a green liquid. Liquid and vapor is irritating to eyes, skin and respiratory system. This product is harmful by inhalation, when in contact with the skin and if it is swallowed. This product may be absorbed by the skin. Use dry chemical or carbon dioxide for small fires, water spray or foam for large fires. Addition of water or foam to the fire may cause frothing.

Continued on next page...

Label Information

DANGER! HARMFUL OR FATAL IF SWALLOWED. Causes birth defects in laboratory animals. May cause kidney and nervous system damage.

Potential Health Effects

Eyes

This product may cause severe eye irritation. This product can cause prolonged vision impairment, tears, swelling and redness.

Skin

This product may be harmful if it is absorbed through the skin.

Ingestion

This product may be fatal if it is swallowed. This product may cause nervous system damage if swallowed. May cause dizziness, incoordination, headache, nausea, and vomiting. Cardiac failure and pulmonary edema may develop after ingestion of this material. Swallowing large volumes of ethylene glycol can lead to kidney damage. Cases of unconsciousness and nystagmus (an involuntary, rapid eye movement) have been reported following an ethylene glycol intoxication.

Inhalation

Excessive inhalation of this product may cause headache, dizziness, blurred vision, nausea and vomiting. Exposure to high concentrations of vapor may cause central nervous system depression. Exposure to vapors may cause damage to the kidneys, liver, lungs and blood.

Section 4 - FIRST AID MEASURES

Eyes

In case of contact with eyes, rinse immediately with plenty of water and seek medical advice. If eyes become inflamed, seek medical advice.

Skin

For skin contact, flush with large amounts of water. If irritation persists,get medical attention.

Ingestion

If the material is swallowed, get immediate medical attention or advice -- Do not induce vomiting.

Inhalation

If gas/fume/vapor/dust/mist from the material is inhaled, remove the affected person immediately to fresh air. If the affected person is not breathing, apply artificial respiration.

Notes to Physician

Ethanol is an antidote for ethylene glycol ingestion. It should be given intravenously as a 5% solution in sodium bicarbonate, at a rate of 10 milliliters per deciliter. Hemodialysis may also be required. The presence of ethanol will inhibit the formation of toxic metabolites.

Continued on next page...

Section 5 - FIRE FIGHTING MEASURES

Flash Point : Approx. 240 deg F
Method Used : TCC
Upper Flammable Limit (UFL): None
Lower Flammable Limit (LFL): 3.2
Auto Ignition : Not Available
Flammability Classification: Not Available
Rate of Burning : Not Available

General Fire Hazards

Shut off the source of fuel, if possible. This product may react explosively when mixed with oxidizing agents.
A sudden release of hot organic vapors/mists from process equipment at elevated temperatures and pressures may result in ignitions without the presence of an obvious ignition source.

Hazardous Combustion Products

Upon decomposition, this product emits carbon monoxide, carbon dioxide and/or low molecular weight hydrocarbons.

Extinguishing Media

Dry chemical, foam, carbon dioxide, water fog. Use water to cool fire-exposed containers and to protect personnel. A solid stream of water may scatter molten product.

Fire Fighting Equipment/Instructions

Wear full set of protective equipment including chemical goggles and gloves.

NFPA Ratings: Health: 3 Fire: 1 Reactivity: 0 Other:

HMIS Ratings: Health: 3 Fire: 1 Reactivity: 0
Personal Protection: gloves, goggles

Section 6 - ACCIDENTAL RELEASE MEASURES

Containment Procedures

Stop the flow of material, if this is without risk. Dike the spilled material, where this is possible. Absorb with inert absorbent such as dry clay, sand or diatomaceous earth, commercial sorbents, or recover using pumps. Scoop up used absorbent into drums.

Clean-Up Procedures

Wear appropriate protective equipment and clothing during clean-up.
Thoroughly wash the area after a spill or leak clean-up.

Evacuation Procedures

Isolate area. Keep unnecessary personnel away.

Special Instructions

Avoid skin contact with the spilled material. Remove soiled clothing and launder before reuse.

Continued on next page...

Section 7 - HANDLING AND STORAGE

Procedures for Handling

Do not get this material in your eyes, on your skin, or on your clothing. Keep this product from heat, sparks, or open flame. Use this product with adequate ventilation. Do not reuse the empty container. Wash thoroughly after handling.

Recommended Storage Methods

Keep this material away from food, drink and animal feed. Keep the container tightly closed and dry.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

Exposure Guidelines

A. General Product Information

Protect from skin and eye contact.

Keep this product away from children and pets.

B. Component Exposure Limits

No ACGIH, NIOSH or OSHA exposure guidelines listed for this product's components.

Engineering Ctrl.: Local exhaust is suggested for use, where possible, in enclosed or confined spaces.

PERSONAL PROTECTIVE EQUIPMENT

Eye/Face: Wear safety glasses with side shields.

Skin: Use impervious gloves for prolonged contact. The use of polyvinyl chloride gloves is recommended. Use of protective coveralls and long sleeves is recommended.

Respiratory: Use an organic vapor respirator for concentrations exceeding the Occupational Exposure Limit. Use supplied-air respiratory equipment as required.

General: Use good industrial hygiene practices. Eyewash fountains and emergency showers are required.

Section 9 - PHYSICAL & CHEMICAL PROPERTIES

Appearance	: Fluorescent Green	Odor	: Not Available
Physical State	: Liquid	pH	: 10.8
Vapor Pressure	: Not Applicable	Vapor Density	: Not Applicable
Boiling Point	: Not Applicable	Freezing Point	: Not Applicable
Melting Point	: Not Applicable	Solubility (H20)	: Not Applicable
Specific Gravity	: 1.12-1.13	Particle Size	: Not Available
Softening Point	: Not Applicable	Evaporation Rate	: Not Applicable
Viscosity	: Not Applicable	Bulk Density	: Not Available
Percent Volatile	: Not Applicable	Molecular Weight	: Mixture

Additional Properties

Reserve alkalinity is typically 7.0

Continued on next page...

Section 10 - CHEMICAL STABILITY & REACTIVITY INFORMATION

Chemical Stability: Stable

Conditions to Avoid: Avoid excessive heat and all sources of ignition.

Incompatibility

Strong oxidizing agents (peroxides, chlorine, strong acids). Avoid mixing with strong acids and bases at elevated temperatures to avoid explosive decomposition.

Hazardous Decomposition Products

Smoke, carbon monoxide and carbon dioxide.

Hazardous Polymerization

Will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

Acute Toxicity/Target Organ Information

A. General Product/Component Information

Ingestion of ethylene glycol can cause kidney and liver damage, metabolic acidosis, and pulmonary edema. Crystals of calcium oxalate will form in the kidney and in the blood vessels of the brain.

B. Component LD50/LC50

Epidemiology

The majority of reported ethylene glycol fatalities are due to kidney failure.

Carcinogenicity

A. General Product/Component Information

No data available on the product as a whole.

B. Component Carcinogenicity Listings

None of this product's components are listed by ACGIH, IARC, NIOSH, NTP or OSHA.

Teratogenicity/Reproductive Effects

Ethylene glycol causes birth defects in laboratory animals. No human data is available.

Neurotoxicity

Ethylene glycol causes central nervous system effects such as irregular eye movements, headache, tremors, drowsiness, coma and convulsions. In the late stages of toxicity cranial nerves have been affected, causing bilateral facial paralysis, diminished hearing and difficult swallowing.

Mutagenicity

Review of information on components indicates no components at greater than 1.0% have mutagenic effects.

Other Information

None.

Continued on next page...

Section 12 - ECOLOGICAL INFORMATION

Ecotoxicity

Keep product out of sewers and waterways.

Environmental Fate

In an aquatic environment, ethylene glycol will biodegrade readily and have a half-life of several days. In the atmosphere ethylene glycol will react with hydroxyl radicals; it will have a half-life of two days. The fate of ehtylene glycol in soil is as of yet, unknown.

Section 13 - DISPOSAL CONSIDERATIONS

US EPA Waste Number & Descriptions

A. General Product Information

Product as shipped does not meet the definition or characteristics of a hazardous waste.

B. Component Waste Numbers

No EPA Waste Numbers are applicable for this product's components.

Disposal Instructions

Do not allow this material to drain into sewers/water supplies. All wastes must be handled in accordance with local, state and federal regulations.

Section 14 - TRANSPORTATION INFORMATION

DOT Information

Shipping Name: Not regulated
Hazard Class: Not regulated
UN/NA #: Not regulated
Packing Group: Not regulated

Label(s) Required

No labels required

Additional Shipping Information

None

International Transportation Regulations

Not regulated as dangerous goods.

Section 15 - REGULATORY INFORMATION

US Federal Regulations

A. General Product Information

No additional information.

B. Component Information

None of this product's components are listed under SARA Section 302 (40 CFR 355 Appendix A), SARA Section 313 (40 CFR 372.65) or CERCLA (40 CFR 302.4).

Continued on next page...

State Regulations

A. General Product Information

No additional information.

B. Component Information

None of this product's components are listed on the state lists from CA, FL, MA, MN, NJ, or PA.

Other Regulations

A. General Product Information

No additional information.

B. Component Information

None of this product's components are listed on the Canadian Controlled Product Ingredient Disclosure List.

Section 16 - OTHER INFORMATION

Other Information

This information is, to the best of Quaker State Corporation's knowledge and belief, accurate and reliable. However, no representation, warranty, or guarantee is made to its accuracy, reliability, or completeness. It is the user's responsibility to satisfy himself as to the suitableness and completeness of such information for his own particular use..

Preparation Information: New MSDS 7/27/95.

Key/Legend

Y = yes; N = No

Contact Person: Vince Bernard,
Corporate Safety Director

Phone: (214)868-0416

End of MSDS #QS-085

Print Date: 08/02/1996

Manufacturer:

MATERIAL SAFETY DATA SHEET

Date Prepared: 11-1-85

Nuturn Corporation
570 Metroplex Drive
Nashville, TN. 37211

By: R.M. Graham

Information Phone No. (615)834-3800
Emergency Phone No. (615)597-6700

Order Code: A-AB-OLS

I. PRODUCT IDENTIFICATION

Friction Material - Oil based lining strips for drum brakes. Premium & Standard Brake Shoe Lining (BB & SS Bonded)
MG-18,25,26,35 and 38.

No CAS numbers apply to product as supplied.

II. HAZARDOUS INGREDIENTS

Chrysotile Asbestos with OSHA standard of 2.0 f/cc 8hr TWA

<7½% coke/carbon products with ACGIH TLV of 3.5mg/M3
OSHA standard of 2.4mg/M3

<4% talc — 2mg/M3 respirable ACGIH

<2% sulfur — 5mg/M3 respirable ACGIH

For MG 25 and 26 Only:
<4% silica — .3mg/M3 total .1mg/M3 respirable ACGIH

Percentage references are for raw material by weight. As manufactured, above ingredients have become part of a bound system through resin and/or other binder additions (as well as pressing, curing, processing the product into the configuration required for the particular application). Additionally, the combination of chemicals creates a chemically bound situation as well, so that the end product no longer exhibits the properties of the individual components as listed above.

III. PHYSICAL DATA

Insoluble — Specific Gravity - 1.4-2.4 where $H_2O = 1$

Appearance and Odor: Reddish brown to grey black with resinous, oil or rubber odor.
Lining stripe, disc pads, clutch, brake block, commercial or industrial friction material.

IV. FIRE AND EXPLOSION HAZARD DATA

Flash Point — Above 600° C (1112° F) Oxygen enriched atmosphere

Extinguishing Media: Water Fog, CO_2, Foam or dry chemical. Use that which is appropriate for surrounding fire.

Special Fire Fighting Procedures: None

Unusual Fire and Explosion Hazards: No explosion hazard, flammable only in oxygen rich temperatures in excess of 600° C.

V. HEALTH HAZARD DATA

A. Primary route of exposure: Inhalation

B. Threshold Limit Value: See individual raw material guide lines in Section II. Overall inert or nuisance mineral dusts should be maintained below 15mg/M3 in total and below 5mg/M3 as the respirable fraction (OSHA 1910.1000 Table Z-3). (ACGIH recommends 10mg/M3 total and 5mg/M3 respirable.) Our employees are required to keep fiber counts below .5 f/cc. regardless of fiber type.

C. Effects of Overexposure:

Short Term Effects: Temporary irritation or rash may occur on skin of some individuals in prolonged contact. Dust of any sort blocks the airways, reduces visibility, and may cause unpleasant deposits in ears, eyes and nasal passages, and extremely dusty condition may cause coughing and sneezing. No other short term effects known.

Long Term Effects: Lung damage can result if subjected to extended duration of high dust exposure without use of respiratory protection. Inhaling asbestos may cause serious bodily harm not immediately evident; i.e., chronic pneumoconiosis, lung cancer, mesothelioma, or asbestosis. SMOKING GREATLY INCREASES THE RISK.

D. Emergency and First Aid Procedures: Avoid breathing dust and fiber. If inhaled, remove to fresh air. Drink water to clear throat and blow nose. (If dust is generated above TLV, respirators must be worn.) Good hygiene recommended by washing hands and face with soap and water prior to eating or smoking. If skin is sensitive, a soothing ointment may be applied to irritated skin after cleansing.

VI. REACTIVITY DATA

Stable material with no known incompatabilities or inherent hazardous decomposition products, except those named in Section II.

VII. SPILL OR LEAK PROCEDURES

A. Steps to be taken in case material is released or spilled:
As manufactured all products are bound. Vibration in shipping may create small quantities of dust or fiber which should not be inhaled. Machining, grinding, riveting will also create dust particles which should be vacuumed or wet prior to removal. Immediately repair broken bags containing dust. Use respirator if airborne dust is present. Do not use compressed air to remove dust. If mopping is necessary, use water or dust suppressant to keep below TLV's.

B. Waste Disposal Method: Scrap pieces should be disposed of in such a way as to prevent airborne dust and fiber. Place dust from grinding and use in airtight containers, marked properly and placed in landfill which handles in compliance with all Federal, State and Local regulations.

VIII. SPECIAL PROTECTION INFORMATION

A. Respiratory Protection: Respirator to comply with OSHA Std. 1910.134 such as 3M 8710 or other NIOSH/MSHA approved respirator, if TLV's exceeded.

B. Local Exhaust: Use adequate exhaust ventilation when grinding or machining to draw dust away from workers to prevent routine inhalation. Do not blow dust with compressor.

Mechanical (General) Remove wear dust with vacuum equipment fitted with Hepa Filter.

C. Eye Protection: Comply with OSHA 1910.133. Dust may cause temporary irritation or inflammation. If TLV's exceeded, do not wear contact lenses. Goggles recommended if machining. Flush eyes with generous amount of water if irritated.

D. Protective Gloves: If irritation of skin occurs or product is abrasive, gloves may be worn.

E. Other: Practice good hygiene; wash thoroughly after handling. Do not wash dust laden clothing with other items. Comply with OSHA Std. 1910.132,133,134.

IX. SPECIAL PRECAUTIONS

Monitor to determine if Dust or Fiber is released above permissible time weighted averages. Clean storage areas of dusts by vacuuming. Use every precaution to keep airborne dusts to a minimum.

(For Asbestos Product) Comply with OSHA Standard 1910.1001.

NOTE:
All data contained herein is based on information from raw material suppliers with cross checks against ACGIH data and OSHA TLV's and is believed to be reliable. However, it is the user's responsibility to determine the safety of the product for his own use. Nuturn has no control on the actual use by others and cannot assume liability for the effects of such use. Governmental regulations or acquisition of additional information may necessitate revisions to any or all sections of this data sheet and such data will be supplied as it becomes available. User is also responsible for obtaining up-to-date information as appropriate.

FID: 00121229
VER DATE: 1993-02-22

CHEMISTRY
MATERIAL SAFETY DATA SHEET

DATE: 05/22/95
TIME: 11:30:08
PAGE: 1

SECTION 01: CHEMICAL PRODUCT & COMPANY ID

PRODUCT PRIMARY NAME: ALL MODELS OF DELCO BATTERIES
ALL SYNONYMS:
ALL DELCO BATTERIES
ALL MODELS OF DELCO BATTERIES
BATTERIES
BATTERY
CLASS: OTHER
DVEL
E 021
E 061
E 1241
E 1549
E 1550
ENV00180
ENV00181
ENV00204
ENV00279
FAH 1849
GA 28
GS12-41
H0984
LIQUID CONTENT - SULFURIC ACID
MILFORD
MODULE: CAR FINAL
OVEL
0057-0246
0057-0267
0057-0323
0057-0644
0057-0782
0057-0783
0057-0784
0057-0785
0057-0923
92K203

MSDS SIGNED BY NAME: RICHARD GALLAGHER
MSDS SIGNED BY TITLE: BATTERY MSDS ADMINISTRATOR

SAFE USE CATEGORY AND DESCRIPTION: 09 - CORROSIVES - CONCENTRATED ACID - pH < 4

MSDS CREATE DATE: 1985-01-01
LAST UPDATED DATE: 1993-02-25

MANUFACTURER'S ID (MID): 000550265
MANUFACTURER'S NAME: DELCO REMY DIV. GMC ANDERSON OPERATIONS
MANUFACTURER'S EMERGENCY PHONE NUMBER/TEXT: US 313-556-1597
MANUFACTURER'S MAILING ADDRESS:
2401 COLUMBUS AVE
P.O. BOX 2439
ANDERSON, IN 46018 US

CHEMICAL FAMILY NAME: LIQUID CONTENT - SULFURIC ACID

MOLECULAR FORMULA: LIQUID CONTENT - H_2SO_4

SECTION 02: COMPOSITION & INGREDIENT INFORMATION

CAS#	FORMULATION		W/V	CHEMICAL NAME
007439921	> 90.0000/	0.0000%	V	LEAD
007664939	= 37.0000/	0.0000%	V	SULFURIC ACID
007732185	B 0.0000/	0.0000%		WATER

THRESHOLD LIMIT VALUE: 1 MG/M3 SULFURIC ACID
PERMISSIBLE EXPOSURE LIMIT: 1 MG/M3 H_2SO_4
CERCLA (SUPERFUND) REPORTABLE QUANTITY (LBS): 1000 LBS.

SECTION 03: HAZARDS IDENTIFICATION

PRIMARY ENTRY ROUTE INDICATORS:

SKIN PRIMARY ENTRY ROUTE INDICATOR: Y
EYE PRIMARY ENTRY ROUTE INDICATOR: N
INHALATION PRIMARY ENTRY ROUTE INDICATOR: Y
INGESTION PRIMARY ENTRY ROUTE INDICATOR: Y
PRIMARY ROUTES OF ENTRY TEXT: INHALATION, SKIN CONTACT, INGESTION

EFFECTS OF OVEREXPOSURE:

CONTACT WITH SULFURIC ACID RESULTS IN RAPID DESTRUCTION OF BODY TISSUE (BURNS). ACCORDING TO THE INTERNATIONAL AGENCY FOR RESEARCH ON CANCER (IARC), OCCUPATIONAL EXPOSURE TO STRONG INORGANIC ACID MISTS CONTAINING SULFURIC ACID IS CARCINOGENIC TO HUMANS.

ADDITIONAL HEALTH HAZARD DATA (FROM SECTION 10): SEPARATOR: POLYETHYLENE. CASE AND COVER: POLYPROPYLENE (PLASTIC). LISTED AS A CARCINOGEN IN NTP, IARC OR OSHA: SULFURIC ACID = IARC.

SECTION 03 - OTHER INFORMATION: N/A

SECTION 04: FIRST AID MEASURES

EMERGENCY FIRST AID PROCEDURES : GENERAL-INHALATION: DO NOT EXCEED 1 MG/M3 TWA. REMOVE TO FRESH AIR. GET MEDICAL ATTENTION. EYE OR SKIN CONTACT: FLUSH WITH LARGE VOLUMES OF WATER, GET MEDICAL ATTENTION. INGESTION: DO NOT INDUCE VOMITING, GIVE MILK MIXED WITH EGG WHITES IF CONSCIOUS, GET MEDICAL ATTENTION.

SECTION 05: FIRE-FIGHTING MEASURES

SPECIAL FIRE FIGHTING PROCEDURES: RECOMMENDED SELF-CONTAINED BREATHING APPARATUS IF BATTERIES ARE INVOLVED IN FIRE DUE TO TOXIC FUMES FROM BURNING PLASTIC AND ACID FUMES AND VAPORS.

UNUSUAL FIRE AND EXPLOSION HAZARDS: WHILE BATTERIES ARE BEING CHARGED, HYDROGEN GAS IS GENERATED. AVOID OPEN FLAME, SPARKS OR LIGHTED MATCHES. ACID, AN OXIDIZER, CAN IGNITE COMBUSTIBLES UPON CONTACT.

SECTION 06: ACCIDENTAL RELEASE MEASURES

SPILL OR LEAK PROCEDURES: LIME OR SODA MAY BE USED TO NEUTRALIZE AND/OR FLUSH WITH LARGE VOLUMES OF WATER.

SECTION 07: HANDLING AND STORAGE

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORAGE: AVOID SKIN CONTACT WHEN CHARGING BATTERIES. AVOID PLACING IN AREAS WHERE HYDROGEN CAN BUILD UP. DO NOT PLACE NEAR OPEN FLAMES, SPARKS, OR LIGHTED MATCHES.

SECTION 07 - OTHER INFORMATION: PAY ATTENTION TO LABELS ON BATTERY AND CARTONS CONTAINING BATTERIES. ADDITIONAL INFORMATION: CASE AND COVER: POLYPROPYLENE (PLASTIC).

SECTION 08: EXPOSURE CONTROLS - PROTECTION

EYE PROTECTION: SPLASH - PROOF SAFETY GOGGLES

RESPIRATORY PROTECTION: USE NIOSH APPROVED RESPIRATORY PROTECTION IF 1 MG/M3 TWA IS EXCEEDED (ACID).

PERSONAL PROTECTIVE EQUIPMENT: USE RUBBER BOOTS AND ACID-PROOF CLOTHING FOR MAJOR SPILLS.

PROTECTIVE GOGGLES (SPECIFY TYPE): RUBBER GLOVES

SECTION 08 - OTHER INFORMATION: N/A

SECTION 09: PHYSICAL & CHEMICAL PROPERTIES

ANALYTICAL VOC TEXT: N/A

PACKAGED VOC VALUE/WEIGHT OR VOLUME CODE: 4.00 BY THEORETICAL VOC TEXT: 4 LB/GAL

BOILING POINT TEMPS: 111.00C/ 233.00F
BOILING POINT TEXT: 233F

SPECIFIC GRAVITY VALUES: R 1.2700 - 1.2900
SPECIFIC GRAVITY TEXT: R 1.27 - 1.29 (VARIES WITH BATT. SIZE)

VAPOR DENSITY TEXT: N/A

VAPOR PRESSURE VALUES/UOM: 2.7300 MMHG
VAPOR PRESSURE TEXT: 2.730 MMHG @ 77F/25C.

PERCENT VOLATILE BY VOLUME TEXT: N/A

PERCENT SOLID BY WEIGHT TEXT: N/A

EVAPORATION RATE TEXT: N/A

SOLUBILITY IN WATER TEXT: MISCIBLE

PH NUMBER SOLUTION TEXT: < 1.0

PACKAGED PH NUMBER CONCENTRATION VALUES: < 1.0000

PHYSICAL STATE: LIQ

PHYSICAL STATE TEXT: *LIQUID/SOLID

SECTION 10: STABILITY & REACTIVITY

STABILITY INDICATOR: Y
STABILITY - CONDITIONS TO AVOID: OXIDIZING OR REDUCING MATERIALS.
STABILITY - TEXT: YES

INCOMPATIBLE MATERIALS: WHEN HEATED, CAN EMIT HIGHLY TOXIC FUMES.

HAZARDOUS POLYMERIZATION INDICATOR: N
HAZARDOUS POLYMERIZATION - CONDITIONS TO AVOID: N/A
HAZARDOUS POLYMERIZATION TEXT: NO

SECTION 13: DISPOSAL CONSIDERATIONS

WASTE DISPOSAL METHOD: ACCORDING TO LOCAL STATE AND FEDERAL REGULATIONS FOR ACID OR LEAD SCRAP.

SECTION 14: TRANSPORT INFORMATION

SHIPPING NAME: LIQUID CONTENT - SULFURIC ACID: PLATE CONTENT - LEAD

U.N. OCDE: 2794

SECTION 16: OTHER INFORMATION

RCRA HAZARDOUS WASTE NUMBER TEXT: D002

LOCAL EXHAUST: YES - AT CHARGING STATIONS

SPECIAL PROTECTION: N/A

SPECIAL PROTECTION (MECHANICAL): N/A

e) brake fluid

MATERIAL SAFETY DATA SHEET

Material Name
Quaker State DOT 3 450 F Brake Fluid

Issue Date: 12/06/1996
MSDS No.: QS-080

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Chemical Name: Mixture of polyglycols
Internal Part No.: 67041 (12/12 oz); 67064 (1 gal)
Product Use: motor vehicle brake fluid

Manufacturer Information
Quaker State Corporation
225 E. John Carpenter Freeway
Irving, Texas 75062
----PHONE #: (800)562-5928
EMERGENCY #: (800)424-9300 CHEMTREC
Mfg. Part #NA

Supplier Information
None

Sup. Part #NA

Synonyms: Mixture

NOTE: CHEMTREC Emergency telephone number is to be used in the event of chemical emergencies involving a spill, leak, fire, exposure, or accident involving chemicals. All non-emergency questions should be directed to customer service.

Section 2 - COMPOSITION / INFORMATION ON INGREDIENTS

CAS #	Components	% Wt.
112-98-1	Dibutoxy Tetraglycol	20-70
89399-28-0	Diethylene Glycol Methyl Ethers	0-30
4353-28-0	3,6,9,12,15-pentaoxaheptadecane	0-30
143-24-8	2,5,8,11,14-pentaoxapentadecane	0-30
25322-68-3	Polyethylene Glycol	0-20
4792-15-8	3,6,9,12-tetraoxatetradecane-1,14-diol	0-10
112-60-7	Tetraethylene Glycol	0-10
112-27-6	Triethylene Glycol	0-10

Component Information/Information on Non-Hazardous Components
This product may be regulated, have exposure limits or other information identified as the following: Glycol Ethers.

The manufacturer has claimed one or more hazardous ingredients as trade secret under the OSHA Hazard Communication Standard. Other components are non-hazardous using the criteria established in 29 CFR 1910.1200 (Hazard Communication). Exact composition of this product will vary with availability of materials. All ingredients listed above may not always be included in final product.

Continued on next page...

Section 3 - HAZARDS IDENTIFICATION

Emergency Overview

Liquid and vapor may be irritating to the eyes, skin and respiratory system. Extinguish fire with carbon dioxide, dry chemical, foam or water fog. Excessive inhalation of this material may cause headache, dizziness and incoordination.

Label Information

WARNING! HARMFUL OR FATAL IF SWALLOWED. EYE AND SKIN IRRITANT.

Potential Health Effects

Eyes

This product may cause irritation to the eyes.

Skin

Prolonged and/or repeated skin contact with this product may cause irritation/dermatitis.

Ingestion

Ingestion can cause gastrointestinal irritation, nausea, vomiting and diarrhea.

Inhalation

Excessive inhalation of this product may cause headache, dizziness, blurred vision, nausea and vomiting. This product may cause irritation to the respiratory system.

Section 4 - FIRST AID MEASURES

Eyes

In case of contact with eyes, rinse immediately with plenty of water and seek medical advice. Get medical attention if eye irritation develops or persists.

Skin

Wash affected area with mild soap and water. Remove contaminated clothing. Get medical attention if skin disorder develops.

Ingestion

If the material is swallowed, get immediate medical attention or advice. Do not induce vomiting unless instructed to do so by medical personnel.

Inhalation

If affected, remove individual to fresh air. Get medical attention if symptoms persist.

Notes to Physician

None.

Section 5 - FIRE FIGHTING MEASURES

Flash Point	: 300 deg F (149 deg C)
Method Used	: COC
Upper Flammable Limit (UFL)	: Not determined
Lower Flammable Limit (LFL)	: Not determined
Auto Ignition	: Not determined
Flammability Classification	: Not determined
Rate of Burning	: Not determined

Continued on next page...

General Fire Hazards
This product is combustible at high temperatures. Shut off the source of fuel, if possible.

Hazardous Combustion Products
None known.

Extinguishing Media
Dry chemical, foam, carbon dioxide, water fog. Use water to cool fire-exposed containers and to protect personnel.

Fire Fighting Equipment/Instructions
Wear self-contained breathing apparatus with a full facepiece operated in the positive pressure demand mode when fighting fires.

NFPA Ratings: Health: 1 **Fire:** 1 **Reactivity:** 0 **Other:**

HMIS Ratings: Health: 1 **Fire:** 1 **Reactivity:** 0
Personal Protection: goggles/gloves

Section 6 - ACCIDENTAL RELEASE MEASURES

Containment Procedures
Contain the discharged material. Absorb with inert absorbent such as dry clay, sand or diatomaceous earth, commercial sorbents, or recover using pumps. Scoop up used absorbent into drums or other appropriate container.

Clean-Up Procedures
Wear appropriate protective equipment and clothing during clean-up. Ventilate the contaminated area. Do not allow the spilled product to enter public drainage system or open water courses.

Evacuation Procedures
Evacuate the area promptly. Keep upwind of the spilled material and isolate exposure. Persons not wearing protective equipment should be excluded from area of spill until clean-up has been completed.

Special Instructions
Remove soiled clothing and launder before reuse. Avoid skin contact and inhalation of vapors during disposal of spills.

Section 7 - HANDLING AND STORAGE

Procedures for Handling
Use this product with adequate ventilation. Do not get this material in your eyes, on your skin, or on your clothing. Wash thoroughly after handling.

Recommended Storage Methods
Keep the container tightly closed and in a cool, well-ventilated place. When using this material, do not eat, drink or smoke. Do not store this material in open or unlabeled containers. Eliminate all sources of ignition.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

Continued on next page...

Exposure Guidelines

A. General Product Information

Protect from skin and eye contact.

B. Component Exposure Limits

No ACGIH, NIOSH or OSHA exposure guidelines listed for this product's components.

Engineering Ctrl.: Use general ventilation and use local exhaust, where possible, in confined or enclosed spaces.

PERSONAL PROTECTIVE EQUIPMENT

Eye/Face: Wear chemical goggles or faceshield if splash or mist occurs.

Skin: Use impervious gloves for prolonged contact. Use of impervious boots is recommended. Use of protective coveralls and long sleeves is recommended.

Respiratory: Use an organic vapor respirator for concentrations exceeding the Occupational Exposure Limit.

General: Launder contaminated clothing before reuse.

Section 9 - PHYSICAL & CHEMICAL PROPERTIES

Appearance	: Pale yellow to amber	**Odor**	: Glycol
Physical State	: Liquid	**pH**	: 10-11.5
Vapor Pressure	: >10 @ 20 deg C	**Vapor Density**	: 4-5
Boiling Point	: 540 deg F	**Freezing Point**	: Not available
Melting Point	: Not available	**Solubility (H20)**	: Infinite
Specific Gravity	: 1.03	**Particle Size**	: Not applicable
Softening Point	: Not applicable	**Evaporation Rate**	: Not determined
Viscosity	: Not determined	**Bulk Density**	: Not determined
Percent Volatile	: Not determined	**Molecular Weight**	: Not determined

Additional Properties

None.

Section 10 - CHEMICAL STABILITY & REACTIVITY INFORMATION

Chemical Stability: Stable

Conditions to Avoid: Avoid excessive heat, formation of mists.

Incompatibility

None identified.

Hazardous Decomposition Products

None known.

Hazardous Polymerization

Hazardous polymerization will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

Acute Toxicity/Target Organ Information

A. General Product/Component Information

Polyethylene glycols are capable of causing rapid clotting which can lead to embolism formation in extreme situations. Polyethylene glycol can cause liver and kidney damage.

Product may cause lethargy and aggravate the mucous membranes.

Continued on next page...

B. Component LD50/LC50
Dibutoxy Tetraglycol (112-98-1)
Oral, rat: LD50 = 6500 mg/kg; Skin, rabbit: LD50 = 10 mL/kg,

2,5,8,11,14-pentaoxapentadecane (143-24-8)
Oral, rat: LD50 = 5140 mg/kg,

Polyethylene Glycol (25322-68-3)
Oral, rat: LD50 = >4 gm/kg; Oral, mouse: LD50 = 20 gm/kg; Skin, rabbit: LD50 = >20 gm/kg

Tetraethylene Glycol (112-60-7)
Oral, rat: LD50 = 28900 uL/kg; Skin, rabbit: LD50 = >20 gm/kg,

Triethylene Glycol (112-27-6)
Oral, rat: LD50 = 17 gm/kg; Skin, rabbit: LD50 = >20 mL/kg,

Epidemiology
No data available for product.

Carcinogenicity
A. General Product/Component Information
No data available on the product as a whole.
B. Component Carcinogenicity Listings
None of this product's components are listed by ACGIH, IARC, NIOSH, NTP or OSHA.

Teratogenicity/Reproductive Effects
Polyethylene glycol has shown evidence of teratogenicity in mice.

Neurotoxicity
High vapor/aerosol concentrations (attainable only at elevated temperatures) may cause central nervous system effects such as dizziness, drowsiness or headaches.

Mutagenicity
No data available on this product as a whole.

Other Information
No other information available.

Section 12 - ECOLOGICAL INFORMATION

Ecotoxicity
No information is available on ecotoxicity of this product.

Environmental Fate
No information is available.

Section 13 - DISPOSAL CONSIDERATIONS

US EPA Waste Number & Descriptions
A. General Product Information
User must test waste using methods described in 40 CFR Part 261 to determine if it meets applicable definitions of hazardous wastes.
B. Component Waste Numbers
No EPA Waste Numbers are applicable for this product's components.

Disposal Instructions
Dispose of waste material according to Local, State, Federal, and Provincial Environmental Regulations.

Continued on next page...

Section 14 - TRANSPORTATION INFORMATION

DOT Information
Shipping Name: Not regulated
Hazard Class: Not classified
UN/NA #: Not classified
Packing Group: Not classified

Label(s) Required
None.

Additional Shipping Information
None.

International Transportation Regulations
None.

Section 15 - REGULATORY INFORMATION

US Federal Regulations

A. General Product Information
All components of this product are listed on the U.S. EPA TSCA Inventory.

B. Component Information
This material contains one or more of the following chemicals required to be identified under SARA Section 302 (40 CFR 355 Appendix A), SARA Section 313 (40 CFR 372.65) and/or CERCLA (40 CFR 302.4):

Glycol Ethers ()
SARA 313: form R reporting required for 1.0% de minimus concentration (applies to R-(OCH2CH2)n-OR' ethers, where n = 1,2, or 3'; R=alkyl C7 or less or R = phenyl or alkyl subst. phenyl; R' = H or alkyl C7 or less, or OR' consisting of carboxylic acid ester, sulfate, phosphate, nitrate, or sulfonate)
CERCLA : final RQ = 1 pound (.454 kg)

State Regulations

A. General Product Information
No components require labeling under California Proposition 65.

B. Component Information
The following components appear on one or more of the following state hazardous substance lists:

Component	Cas #	CA	FL	MA	MN	NJ	PA
Dibutoxy Tetraglycol	112-98-1	N	Y	Y	N	N	Y
Glycol Ethers		N	N	N	N	N	Y
Polyethylene Glycol	25322-68-3	N	N	N	Y	N	N
Triethylene Glycol	112-27-6	N	N	N	N	N	Y

Continued on next page...

Other Regulations

A. General Product Information

All known (non-proprietary) components of this product are listed on the EINECS inventory of existing chemicals.

B. Component Information

CANADA

The following components are identified under the Canadian Hazardous Products Act Ingredient Disclosure List:

Component	CAS #	%	Minimum Concentration
Triethylene Glycol	112-27-6	0-10	1% item 1625 (1667)

Section 16 - OTHER INFORMATION

Other Information

This information is, to the best of Quaker State Corporation's knowledge and belief, accurate and reliable. However, no representation, warranty, or guarantee is made to its accuracy, reliability, or completeness. It is the user's responsibility to satisfy himself as to the suitableness and completeness of such information for his own particular use.

Preparation Information: Revisions to Section 4 made 12/06/96.

Key/Legend

None necessary.

Contact Person: Vince Bernard,
Corporate Safety Director

Phone: (800) 562-5928

End of MSDS #QS-080

Print Date: 12/14/1996

U.S. DEPARTMENT OF LABOR
Occupational Safety and Health Administration

Form Approved
OMB No. 44-R1367

MATERIAL SAFETY DATA SHEET

Required under USDL Safety and Health Regulations for Ship Repairing, Shipbuilding, and Shipbreaking (29 CFR 1915, 1916, 1917)

SECTION I

MANUFACTURER'S NAME	EMERGENCY TELEPHONE NO.
Golden Empire Concrete Co.	(805) 325-6833
ADDRESS (Number, Street, City, State, and ZIP Code) 216 Mt. Vernon Ave. Bakersfield, Ca. 93307	
CHEMICAL NAME AND SYNONYMS N/A	TRADE NAME AND SYNONYMS FRESHLY MIXED UNHARDENED CONCRETE
CHEMICAL FAMILY CALCIUM SALTS	FORMULA SEE ATTACHED SHEETS

SECTION II · HAZARDOUS INGREDIENTS

PAINTS, PRESERVATIVES, & SOLVENTS	X	TLV (Units)	ALLOYS AND METALLIC COATINGS	X	TLV (Units)
PIGMENTS N/A			BASE METAL N/A		
CATALYST N/A			ALLOYS N/A		
VEHICLE N/A			METALLIC COATINGS N/A		
SOLVENTS N/A			FILLER METAL PLUS COATING OR CORE FLUX N/A		
ADDITIVES N/A			OTHERS N/A		
OTHERS N/A			N/A		

HAZARDOUS MIXTURES OF OTHER LIQUIDS, SOLIDS, OR GASES	X	TLV (Units)
SEE SUPPLEMENT TO THIS SECTION ATTACHED		

SECTION III · PHYSICAL DATA

BOILING POINT (°F.)	N/A	SPECIFIC GRAVITY (H_2O=1)	1.9 - 2.4
VAPOR PRESSURE (mm Hg.)	N/A	PERCENT, VOLATILE BY VOLUME (%)	N/A
VAPOR DENSITY (AIR=1)	N/A	EVAPORATION RATE (_____ =1)	N/A
SOLUBILITY IN WATER	N/A		N/A
APPEARANCE AND ODOR	GRAY, PLASTIC, FLOWABLE, GRANULAR MUD AND ODORLESS		

SECTION IV · FIRE AND EXPLOSION HAZARD DATA

FLASH POINT (Method used)	N/A	FLAMMABLE LIMITS N/A	LEL	UEL
EXTINGUISHING MEDIA	N/A			
SPECIAL FIRE FIGHTING PROCEDURES	N/A			
UNUSUAL FIRE AND EXPLOSION HAZARDS	NONE			

SECTION V · HEALTH HAZARD DATA

THRESHOLD LIMIT VALUE
N/A

EFFECTS OF OVEREXPOSURE
PLASTIC UNHARDENED CONCRETE CAN DRY THE SKIN AND CAUSE ALKALI BURNS (CEMENT DERMATITIS). (CEMENT MAY CONTAIN TRACES OF HEXAVALENT CHROMIUM.)

EMERGENCY AND FIRST AID PROCEDURES
IRRIGATE EYES WITH WATER. WASH AFFECTED AREAS OF THE BODY WITH SOAP AND WATER.

SECTION VI · REACTIVITY DATA

STABILITY	UNSTABLE	X	CONDITIONS TO AVOID PRODUCT SETS AND HARDENS IN 2 - 8 HOURS AND IS NO
	STABLE		LONGER HAZARDOUS

INCOMPATABILITY *(Materials to avoid)*
NONE

HAZARDOUS DECOMPOSITION PRODUCTS
NONE

HAZARDOUS POLYMERIZATION	MAY OCCUR		CONDITIONS TO AVOID
	WILL NOT OCCUR	X	

SECTION VII · SPILL OR LEAK PROCEDURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED
SPILL DOES NOT INCREASE HAZARD.

WASTE DISPOSAL METHOD
MATERIAL CAN BE RETAINED UNTIL IT HARDENS WHEN IT CAN BE DISPOSED OF AS COMMON WASTE.

SECTION VIII · SPECIAL PROTECTION INFORMATION

RESPIRATORY PROTECTION *(Specify type)*

VENTILATION	LOCAL EXHAUST	SPECIAL
	MECHANICAL *(General)*	OTHER

PROTECTIVE GLOVES
SEE ATTACHED

EYE PROTECTION
NOT GENERALLY REQUIRED EXCEP WHEN PLACING METHODS CAUSE SPLASH. THEN TIGHT-FITTING GOGGLES SHOULD BE USED.

OTHER PROTECTIVE EQUIPMENT

SECTION IX · SPECIAL PRECAUTIONS

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING
SEE ABOVE

OTHER PRECAUTIONS
SEE ABOVE

Material Safety Data Sheet
Freshly Mixed Unhardened Concrete

Section II Supplement:

Formula--Mixtures of portland or blended cements, concrete aggregates and chemical admixtures.

Portland and Blended Cements:

$3CaO\text{-}SiO_2$ (CAS # 12168-85-3)

$2CaO\text{-}SiO_2$ (CAS # 10034-77-2)

$3CaO\text{-}Al_2O_3$ (CAS # 23042-78-3)

$4CaO\text{-}Al_2O_3.Fe_2O_3$ (CAS # 12068-35-8)

$CaSO_4.2H_2O$ (CAS # 7778-18-9)

plus traces of CaO, MgO, K_2SO_4, and Na_2SO_4.

Concrete Aggregates: Inert gravel, sand and rocks.

Admixtures: May include fly ash, granulated slag and very small amounts of organic and inorganic materials which have no effect on the hazards associated with the use of the product.

Section's VIII, IX

Protective Equipment-- Use barrier creams, gloves, boots, and clothing to protect the skin from prolonged contact with plastic concrete. Particularly avoid abrasion of the skin in contact with unhardened plastic concrete. Immediately after working with concrete, workers should shower with soap and water. Precautions must be observed because cement burns occur with little warning -- little heat is sensed.

MATERIAL SAFETY DATA SHEET

Consumer Products Division, Division of Borden, Inc.
180 EAST BROAD STREET, COLUMBUS, OHIO 43215

Emergency Telephone
(614) 431-6600
(OPERATION ALERT)

THE OSHA HAZARD COMMUNICATION STANDARD 29 CFR 1910.1200 REQUIRES THAT THE INFORMATION CONTAINED ON THIS SHEET BE MADE AVAILABLE TO YOUR WORK

INSTRUCT YOUR WORKERS TO HANDLE THIS PRODUCT PROPERLY

NAME: **KRYLON INT./EXT. ENAMEL OR ENGINE COLOR**
TYPE: **SPRAY PAINT "AEROSOL"**
APPLICATION: **ITEM NOS.: 1501 THRU 2505 — 1501 GLOSSY WHITE; 1502 FLAT WHITE; 1503 ANTIQUE WHITE; 1506 ALMOND; GLOSSY BLACK; 1602 ULTRA FLAT BLACK; 1603 CHARCOAL GRAY; 1604 SHADOW GRAY; 1605 DOVE GRAY; 1608 SMOKE GRAY; 1611 UNIVE GRAY, ENGINE COLOR; 1612 UNIVERSAL BLACK, ENGINE COLOR; 1613 SEMI-FLAT BLACK; 1617 PEARL GRAY; 1619 CAST MAGIC; 1631 B LACQUER; 1704 SPANISH BROWN; 1705 ENGINE GOLD, ENGINE COLOR; 1801 CHROME YELLOW; 1802 PASTEL YELLOW; 1803 MARIGOLD YEI (OLD CATERPILLAR YELLOW); 1804 BRIGHT YELLOW (JOHN DEERE YELLOW); 1809 SCHOOL BUS YELLOW; 1811 HARVEST GOLD; 1813 DAISY YEI (OSHA SAFETY YELLOW); 1814 TOPAZ YELLOW (NEW CATERPILLAR YELLOW); 1901 REGAL BLUE; 1902 BABY BLUE; 1903 METALLIC BLUE; CHEVROLET BLUE, ENGINE COLOR; 1909 FORD BLUE, ENGINE COLOR; 1910 TRUE BLUE; 1923 FORD DARK BLUE, ENGINE COLOR; 1928 CHRY LIGHT BLUE, ENGINE COLOR; 1929 PLUM (SAFETY PURPLE); 1930 G.M. BLUE, ENGINE COLOR; 2001 HUNTER GREEN; 2002 PASTEL AQUA; 2004 M GREEN (JOHN DEERE/CASE GREEN); 2005 ERIN GREEN (OLIVER GREEN; 2007 FORD GREEN, ENGINE COLOR; 2008 AQUA TURQUOISE; AVOCADO; 2011 JUNGLE GREEN; 2012 CLOVER GREEN (SAFETY GREEN); 2013 G.M. ALPINE GREEN (DETROIT DIESEL), ENGINE COLOR; 2101 CHI RED; 2103 AMERICAN BEAUTY RED (INTERNATIONAL HARVESTER RED); 2106 FORD RED, ENGINE COLOR; 2108 BANNER RED; 2110 HOT PINK; CHRYSLER RED, ENGINE COLOR; 2114 BUICK RED, ENGINE COLOR; 2116 SCARLET (OSHA SAFETY RED); 2117 BONFIRE; 2118 BURGUNDY; 2301 KHAKI; 2401 SUNSET ORANGE; 2404 MANDARIN ORANGE; 2405 CHEVROLET ORANGE, ENGINE COLOR; 2406 BURNT ORANGE; 2410 POPS ORANGE (SAFETY ORANGE); 2411 BRICK; 2501 LEATHER BROWN; 2504 BEIGE, 2505 CHIPPEWA;/15012 GLOSSY WHITE; 15022 FLAT WHITE: 15 ANTIQUE WHITE; 15062 ALMOND; 16012 GLOSSY BLACK; 16022 ULTRA FLAT BLACK; 16052 DOVE GRAY; 16082 SMOKE GRAY; 16132 SEMI I BLACK; 18042 BRIGHT YELLOW; 19012 REGAL BLUE; 20012 HUNTER GREEN; 21012 CHERRY RED; 21082 BANNER RED; 25012 LEATHER BRO 25042 BEIGE** 30-Ju

SIGNAL WORD-DANGER!

THIS MATERIAL IS A "HEALTH HAZARD" AND/OR A "PHYSICAL HAZARD" AS DETERMINED WHEN REVIEWED ACCORDING TO THE REQUIREMENTS OF THE OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION 29 CFR PART 1910.1200 "HAZARD COMMUNICATION" STANDARD.

CHEMICAL HAZARD RATING
HEALTH=2(MODERATE)
FIRE=4(EXTREME)
REACTIVITY=0(LEAST)
CHRONIC=*

29CFR1910.1200 HAZARDOUS INGREDIENTS/REPORTED HEALTH EFFECTS

CAS REGISTRY NO. MATERIAL DESCRIPTION — **% BY WT.**

67-64-1 ACETONE — 36.-37.
CAN CAUSE CENTRAL NERVOUS SYSTEM DEPRESSION. SIGNS AND SYMPTOMS MAY INCLUDE HEADACHE, DIZZINESS, NAUSEA, VOMITING, UNCONSCIOUSNESS AND EVEN ASPHYXIATION.
ACGIH TLV: 750 PPM (1780 MG/M3) TWA; 1000 PPM(2375 MG/M3) STEL
OSHA PEL: 1000 PPM (2400 MG/M3) TWA
NIOSH DOCUMENT NUMBER: 78-173

71-36-3 BUTYL ALCOHOL — 0.2-2.6
CAN CAUSE CENTRAL NERVOUS SYSTEM DEPRESSION. SIGNS AND SYMPTOMS MAY INCLUDE HEADACHE, DIZZINESS, NAUSEA, VOMITING, UNCONSCIOUSNESS AND EVEN ASPHYXIATION.
ACGIH TLV: SKIN - 50 PPM (50 MG/M3) CEILING
OSHA PEL: 100 PPM (300 MG/M3) TWA

74-98-6 PROPANE — 16.-17.
THIS MATERIAL IS A SIMPLE ASPHYXIANT. SIGNS AND SYMPTOMS OF OVEREXPOSURE INCLUDE CYANOSIS, RESPIRATORY DISTRESS, HEADACHE, DIZZINESS, DROWSINESS, UNCONSCIOUSNESS AND ASPHYXIATION.
CAN CAUSE CENTRAL NERVOUS SYSTEM DEPRESSION.
ACGIH TLV: SIMPLE ASPHXIANT-SEE ACGIH TLVS, APPENDIX E
OSHA PEL: 1000 PPM (1800 MG/M3) TWA

78-93-3 METHYL ETHYL KETONE — 8.-17.
POSSIBLE REPRODUCTIVE HAZARD. OVEREXPOSURE MAY CAUSE FEMALE REPRODUCTIVE DISORDERS BASED ON TEST WITH LABORATORY ANIMALS
CAN CAUSE CENTRAL NERVOUS SYSTEM DEPRESSION. SIGNS AND SYMPTOMS MAY INCLUDE HEADACHE, DIZZINESS, NAUSEA, VOMITING, UNCONSCIOUSNESS, AND EVEN ASPHYXIATION.
ACGIH TLV: 200 PPM (590 MG/M3) TWA; 300 (885 MG/M3) STEL
OSHA PEL: 200 PPM (590 MG/M3) TWA
NIOSH DOCUMENT NUMBER: 78-173

108-10-1 METHYL ISOBUTYL KETONE
CAN CAUSE CENTRAL NERVOUS SYSTEM DEPRESSION. SIGNS AND SYMPTOMS MAY INCLUDE HEADACHE, DIZZINESS, NAUSEA, VOMITING, UNCONSCIOUSNESS AND EVEN ASPHYXIATION.
ACGIH TLV: 50 PPM (205 MG/M3) TWA; 75 PPM (300 MG/M3) STEL
OSHA PEL: 100 PPM (410 MG/M3) TWA
NIOSH DOCUMENT NUMBER: 78-173

108-65-6 2-PROPANOL, 1-METHOXY-, ACETATE — 7

108-88-3 TOLUENE — 2
OVEREXPOSURE MAY CAUSE LIVER DAMAGE.
OVEREXPOSURE MAY CAUSE KIDNEY DAMAGE.
CAN CAUSE CENTRAL NERVOUS SYSTEM DEPRESSION. SIGNS AND SYMPTOMS MAY INCLUDE HEADACHE, DIZZINESS, NAUSEA, VOMITING, UNCONSCIOUSNESS ASPHYXIATION. REPORTS HAVE ASSOCIATED REPEATED AND PROLONGED OCCUPATIONAL OVEREXPOSURE WITH PERMANENT BRAIN AND NERVOUS SYSTEM DAMAGE. INTENTIONAL MISUSE BY DELIBERATELY CONCENTRATI AND INHALING THE CONTENTS MAY LEAD TO ADDICTION AND MA BE HARMFUL OR FATAL.
ACGIH TLV: 100 PPM (375 MG/M3) TWA; 150 PPM (560 MG/M3) STEL
OSHA PEL: 200 PPM TWA; 300 PPM CEILING; 500 PPM 10-MIN. PEAK
NIOSH DOCUMENT NUMBER: 73-11023

1330-20-7 XYLENE — 8.-1
OVEREXPOSURE MAY CAUSE LIVER DAMAGE.
OVEREXPOSURE MAY CAUSE KIDNEY DAMAGE.
CAN CAUSE CENTRAL NERVOUS SYSTEM DEPRESSION. SIGNS AND SYMPTOMS MAY INCLUDE HEADACHE, DIZZINESS, NAUSEA, VOMITING, UNCONSCIOUSNESS AND EVEN ASPHYXIATION.
ACGIH TLV: 100 PPM (435 MG/M3) TWA; 150 PPM (655 MG/M3) STEL
OSHA PEL: 100 PPM (435 MG/M3) TWA
NIOSH DOCUMENT NUMBER: 75-168

SEE REVERSE SIDE

PHYSICAL DATA

VAPOR PRESSURE -- SEE CAN PRESSURE
VAPOR OENSITY HEAVIER THAN AIR
SOLUBILITY IN WATER -- SLIGHT
SPECIFIC GRAVITY LIGHTER TIIAN WATER
EVAP RATE FASTER TIIAN BUTYL ACETATE
BOILING POINT; APPEARANCE; OOOR -- N.A.
PERCENT VOLATILE BY WEIGIIT 81 TO 89
PERCENT NON-VOLATILE BY WEIGHT 11 TO 19
PRESSURE IN CONTAINER, PSIG @ 70 F. APPROX. 60

ACUTE HEALTH HAZARD DATA

SKIN ABSORPTION: NOT EXPECTED TO BE HARMFUL UNOER NORMAL CONOITIONS OF USE.
INGESTION: MAY BE HARMFUL IF SWALLOWEO.
INHALATION: MAY BE HARMFUL IF INHALEO. LIOUIO OR VAPOR CAN CAUSE IRRITATION OF NOSE, THROAT ANO LUNGS.
SKIN: CAUSES IRRITATION.
EYES: CAUSES IRRITATION.

HANDLING PRECAUTIONS

SKIN ABSORPTION: AVOIO PROLONGEO OR REPEATEO CONTACT WITH EYES, SKIN OR CLOTHING.
INHALATION: AVOIO BREATHING VAPOR OR MIST.
USE WITH ADEQUATE VENTILATION.
SKIN: AVOIO CONTACT WITH SKIN.
EYES: AVOIO CONTACT WITH EYES.
HANOLE IN ACCOROANCE WITII GOOO INOUSTRIAL HYGIENE ANO SAFETY PRACTICES. THESE PRACTICES INCLUOE AVOIOING UNNECESSARY EXPOSURE ANO REMOVAL OF THE MATERIAL FROM EYES, SKIN ANO CLOTHING.
WASH TIIOROUGHLY AFTER HANOLING.

EMERGENCY AND FIRST AID PROCEDURES

INGESTION: IF SWALLOWEO, OO NOT INOUCE VOMITING. CALL A PHYSICIAN IMMEOIATELY.
SKIN ABSORPTION: IN CASE OF CONTACT, IMMEDIATELY FLUSH EYES OR SKIN WITII PLENTY OR WATER FOR AT LEAST 15 MINUTES.
INHALATION: REMOVE TO FRESH AIR. IF NOT BREATHING, GIVE ARTIFICIAL RESPIRATION, PREFERABLY MOUTH-TO-MOUTH. IF BREATHING IS OIFFICULT, GIVE OXYGEN. CALL A PHYSICIAN.
SKIN CONTACT: FLUSII SKIN WITH WATER. IF IRRITATION PERSISTS, CALL A PHYSICIAN.
CONTACT: IMMEOIATELY FLUSH EYES WITII PLENTY OF WATER FOR AT LEAST 15 MINUTES. EYELIOS SIIOULO BE HELO APART OURING IRRIGATION TO INSURE WATER CONTACT WITH ENTIRE SURFACE OF EYES ANO LIOS. CALL A PHYSICIAN.

FIRE AND EXPLOSION HAZARD DATA

EXTREMELY FLAMMABLE.
CONTENTS UNOER PRESSURE; EXPOSURE TO HIGII TEMPERATURE MAY CAUSE BURSTING. AVOIO RAOIATORS, STOVES, OIRECT SUNLIGHT, OR OTHER HEAT SOURCE. OO NOT PUNCTURE OR INCINERATE CONTAINER. OO NOT SPRAY NEAR OPEN FLAME.
IN CASE OF FIRE, USE ORY CHEMICAL, FOAM OR C02. WATER MAY BE INEFFECTIVE, BUT SHOULO BE USEO TO KEEP FIRE-EXPOSEO CONTAINERS COOL.

REACTIVITY DATA

NORMALLY STABLE AS OEFINEO IN NFPA 704-12(4-3.1).
MAJOR OECOMPOSITION PROOUCTS: CO, C02
HAZAROOUS POLYMERIZATION WILL NOT OCCUR

CONTROL MEASURES

IF AIRBORNE CONTAMINANTS ARE GENERATEO WIIEN TIIE MATERIAL IS HEATEO OR HANOLEO, SUFFICIENT VENTILATION IN VOLUME AND AIR FLOW PATTERNS SHOULO BE PROVIOEO TO KEEP AIR CONTAMINANT CONCENTRATION LEVELS BELOW ACCEPTABLE CRITERIA.
ENGINEERING CONTROLS: THE FOLLOWING EXPOSURE CONTROL TECHNIOUES MAY BE USEO TO EFFECTIVELY MINIMIZE EMPLOYEE EXPOSURE: LOCAL EXHAUST VENTILATION, ENCLOSEO SYSTEM OESIGN, PROCESS ISOLATION ANO REMOTE CONTROL IN COMBINATION WITH APPROPRIATE USE OF PERSONAL PROTECTIVE EOUIPMENT ANO PRUOENT WORK PRACTICES. THESE TECHNIOUES MAY NOT NECESSARILY AOORESS ALL ISSUES PERTAINING TO YOUR OPERATIONS. WE, THEREFORE, RECOMMEND THAT YOU CONSULT WITH EXPERTS OF YOUR CHOICE TO OETERMINE WIIETHER OR NOT YOUR PROGRAMS ARE AOEOUATE.

PERSONAL PROTECTION INFORMATION

WHERE AIR CONTAMINANTS CAN EXCEEO ACCEPTABLE CRITERIA, USE NIOSH/MSHA APPROVEO RESPIRATORY PROTECTION EOUIPMENT. RESPIRATORS SIIOULO BE SELECTEO BASEO ON THE FORM ANO CONCENTRATION OF CONTAMINANTS IN AIR IN ACCOROANCE WITH OSHA 29 CFR 1910.134 OR OTHER APPLICABLE STANOAROS OR GUIOELINES.
USE GOGGLES IF CONTACT IS LIKELY.
WEAR IMPERVIOUS GLOVES AS REOUIRED TO PREVENT SKIN CONTACT.

SPILL OR LEAK PROCEDURES

ELIMINATE ALL IGNITION SOURCES.
SOAK UP WITII ABSORBENT MATERIAL ANO REMOVE TO A CIIEMICAL OISPOSAL AREA.
PREVENT ENTRY INTO NATURAL BOOIES OF WATER.

WASTE DISPOSAL METHOD

OISPOSE OF ACCORDING TO LOCAL, STATE, ANO FEOERAL REOUIREMENTS.
EMPTY CONTAINER: MAY CONTAIN EXPLOSIVE VAPORS. OO NOT CUT, PUNCTURE OR WELO ON OR NEARBY. INCINERATION WILL CAUSE CONTAINER TO BURST VIOLENTLY.

STORAGE PRECAUTIONS

OO NOT STORE AT TEMPERATURES OVER 120 F.

DOT CLASSIFICATION

ORM-O CONSUMER COMMOOITY

NOR(M) KD-1501C 06/30/86

DISCLAIMER

SELLER MAKES NO WARRANTY, EXPRESS OR IMPLIED, CONCERNING THE PRODUCT OR THE MERCHANTABILITY OR FITNESS THEREOF FOR ANY PURPOSE OR CONCERNING THE ACCURACY OF ANY INFORMATION PROVIDED BY BORDEN, except that the product shall conform to contracted specifications, and that the product does not infringe any valid United States patent. The information provided herein was believed by Borden to be accurate at the time of preparation or prepared from sources believed to be reliable, but it is the responsibility of the user to investigate and understand other pertinent sources of information, to comply with all laws and procedures applicable to the safe handling and use of product and to determine the suitability of the product for its intended use. Buyer's exclusive remedy shall be for damages and no claim of any kind, whether as to product delivered or for non-delivery of product, and whether based on contract, breach of warranty, negligence or otherwise shall be greater in amount than the purchase price of the quantity of product in respect of which damages are claimed. In no event shall Seller be liable for incidental or consequential damages, whether Buyer's claim is based on contract, breach of warranty, negligence or otherwise.

f) engine motor oil

MATERIAL SAFETY
DATA SHEET

Material Name
Quaker State DeLuxe 10W-40 Motor Oil

Issue Date: 11/01/1994
MSDS No.: QS-015

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Chemical Name: Petroleum distillate mixture
Internal Part No.: Order Nos. 36306 (case/4x4qt); 36310 (55 gallon); 36319 bulk
Product Use:

Manufacturer Information
Quaker State Corporation
225 E. John Carpenter Freeway
Irving, Texas 75062
----PHONE #: (800)562-5928
EMERGENCY #: (214)868-0416
Mfg. Part #NA

Supplier Information
None
Sup. Part #NA

Synonyms: Motor Oil

Section 2 - COMPOSITION / INFORMATION ON INGREDIENTS

CAS #	Components	% Vol
64742-65-0	Petroleum Distillates, Solvent Dewaxed Heavy Paraffinic	60-75
64742-62-7	Residual oil, solvent dewaxed	1-10
68649-42-3	Zinc C1-C14 alkyldithiophosphate	1-2
68648-89-5	Styrene-ethylene/propylene block polymer	5-10
127883-08-3	Ethylene/propylene copolymer	1-2
84605-20-9	Polyolefin alkene amine	1-5

Component Information/Information on Non-Hazardous Components
This product is not considered a hazardous product under 29 CFR 1910.1200 (Hazard Communication). All mineral oils used in this product have been severely hydrotreated and/or solvent refined.

Section 3 - HAZARDS IDENTIFICATION

Emergency Overview
This product is a viscous amber liquid. It will burn at elevated temperatures (above 400 F). Addition of water or foam to the fire may cause frothing. Use dry chemical or carbon dioxide for small fires, water spray or foam for large fires.

Continued on next page...

Label Information

WARNING: Continuous contact with used motor oil has caused skin cancer in animal tests. Avoid prolonged contact. Wash skin with soap and water. Launder or discard soiled clothes.

Potential Health Effects

Eyes

This product may cause irritation to the eyes.

Skin

Prolonged or repeated contact with skin may cause mild irritation and possibly dermatitis. Symptoms may include redness, edema, drying, defatting and cracking of the skin.

Ingestion

Low toxicity. Swallowing may cause stomach cramps and diarrhea. Pulmonary aspiration hazard if swallowed.

Inhalation

Negligible hazard at room temperature (up to 95 degrees F). High temperatures or mechanical action may form mists or fumes. Inhalation of oil mists or fumes can cause irritation of the nose, throat and upper respiratory tract.

Section 4 - FIRST AID MEASURES

Eyes

Flush eyes with large amounts of water for 15 minutes. If eyes become inflamed, seek medical advice.

Skin

Remove contaminated clothing. Wash affected area with mild soap and water. Launder contaminated clothing before reuse. If leather articles become saturated they should be discarded.

Ingestion

Do not induce vomiting unless instructed to do so by a physician. Call your local poison control center or get medical attention.

Inhalation

Remove to fresh air. If not breathing, give mouth to mouth resuscitation. If breathing is difficult, give oxygen. Call a physician.

Notes to Physician

This material, if aspirated into the lungs, may cause chemical pneumonitis; treat the affected person appropriately.

Section 5 - FIRE FIGHTING MEASURES

Flash Point	: 400 deg F (204 deg C)
Method Used	: Cleveland Open Cup
Upper Flammable Limit (UFL)	: Not determined
Lower Flammable Limit (LFL)	: Not determined
Auto Ignition	: Not determined

Continued on next page...

Flammability Classification: IIIB
Rate of Burning : Not determined
General Fire Hazards
This product is combustible at high temperatures.
Hazardous Combustion Products
Carbon dioxide, carbon monoxide, oxides of sodium, calcium, magnesium, phosphorus, and zinc.
Extinguishing Media
Dry chemical or carbon dioxide for small fires. Water spray or foam for large fires.
Fire Fighting Equipment/Instructions
Wear full set of protective equipment including chemical goggles and gloves. Use water spray to cool fire-exposed containers and as a protective screen. Do not point solid water stream directly into burning oil to avoid spreading.

NFPA Ratings: Health: 1 Fire: 1 Reactivity: 0 Other:

HMIS Ratings: Health: 1 Fire: 1 Reactivity: 0
Personal Protection: gloves, glasses/face shield

Section 6 - ACCIDENTAL RELEASE MEASURES

Containment Procedures
Eliminate all sources of ignition or flammables that may come into contact with a spill of this material. Stop the flow of material, if this is without risk.
Clean-Up Procedures
Wear appropriate protective equipment and clothing during clean-up. Absorb with inert absorbent such as dry clay, sand or diatomaceous earth, commercial sorbents, or recover using pumps. Scoop up used absorbent into drums. Do not allow the spilled product to enter public drainage systems or open water courses. Surfaces may become slippery after spillage.
Evacuation Procedures
Persons not wearing protective equipment should be excluded from area of spill until clean-up has been completed.
Special Instructions
Remove soiled clothing and launder before reuse. Avoid skin contact and inhalation of vapors during disposal of spills.

Section 7 - HANDLING AND STORAGE

Procedures for Handling
Avoid getting this material into contact with your skin and eyes. Avoid breathing fumes if this product is used at high temperatures. Avoid the generation of oil mists. Wash hands after handling and

Continued on next page...

before eating. Launder work clothes frequently.

Recommended Storage Methods

Keep the container tightly closed and in a cool, well-ventilated place. Do not store this material in open or unlabeled containers. Store away from strong oxidizers. Empty containers may retain product residue including flammable or explosive vapors. Do not cut, drill, grind, or weld near full, partially full, or empty product containers.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

Exposure Guidelines

A. General Product Information

If oil mists are generated, observe the OSHA exposure limit of 5 mg/m3. Protect from skin and eye contact.

B. Component Exposure Limits

No ACGIH, NIOSH or OSHA exposure guidelines listed for this product's components.

Engineering Ctrl.: Use general ventilation. Use in a well-ventilated area.

PERSONAL PROTECTIVE EQUIPMENT

Eye/Face: Wear safety glasses; chemical goggles (if splashing is possible).

Skin: Use impervious gloves for prolonged contact or any contact with used oil. The use of neoprene gloves is recommended.

Respiratory: Normally not necessary. If mist is generated (heating, spraying) and engineering controls are not sufficient, wear approved organic vapor respirator suitable for oil mist.

General: Use good hygiene when handling petroleum product.

Section 9 - PHYSICAL & CHEMICAL PROPERTIES

Appearance	: Light amber	Odor	: Mild hydrocarbon
Physical State	: Liquid	pH	: Not available
Vapor Pressure	: Negligible	Vapor Density	: Not determined
Boiling Point	: Not determined	Freezing Point	: Not determined
Melting Point	: Not determined	Solubility (H20)	: Negligible in water
Specific Gravity	: 0.87 to 0.88	Particle Size	: Not applicable
Softening Point	: Not determined	Evaporation Rate	: Not determined
Viscosity	: approx. 465 SUS @ 100 F	Bulk Density	: Not determined
Percent Volatile	: Negligible	Molecular Weight	: Mixture

Additional Properties

None

Section 10 - CHEMICAL STABILITY & REACTIVITY INFORMATION

Chemical Stability: Stable

Conditions to Avoid: Avoid excessive heat and all sources of ignition.

Continued on next page...

Incompatibility
Strong oxidizing agents (peroxides, chlorine, strong acids).

Hazardous Decomposition Products
At thermal decomposition temperatures carbon dioxide, carbon monoxide, oxides of calcium, magnesium, phosphorus, and zinc.

Hazardous Polymerization
Hazardous polymerization will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

Acute Toxicity/Target Organ Information
A. General Product/Component Information
Based on similar products the LD50 is expected to be greater than 5,000 mg/kg. Product has the ability to cause oil acne on the skin and fibrosis in the lung.
B. Component LD50/LC50

Epidemiology
No data available for product.

Carcinogenicity
A. General Product/Component Information
No data available on the product as a whole. Note that USED oils tend to contain higher amounts of the cancer-causing aromatics, which have been linked to scrotal and lung cancer in humans.
B. Component Carcinogenicity Listings
None of this product's components are listed by ACGIH, IARC, NIOSH, NTP or OSHA.

Teratogenicity/Reproductive Effects
No data available for the product as a whole. Review of information on components indicates no components at greater than 1.0% have teratogenic effects.

Neurotoxicity
No data available on this product as a whole. Excessive exposure to the oil mist and vapors may cause respiratory tract irritation.

Mutagenicity
No data available on this product as a whole. Review of information on components indicates no components at greater than 1.0% have mutagenic effects.

Other Information
Persons with skin or respiratory conditions may be more sensitive to product.

Section 12 - ECOLOGICAL INFORMATION

Ecotoxicity
No information is available on ecotoxicity of this product. Keep product out of sewers and waterways.

Continued on next page...

Environmental Fate
No information is available.

Section 13 - DISPOSAL CONSIDERATIONS

US EPA Waste Number & Descriptions
A. General Product Information
Product as shipped does not meet the definition or characteristics of a hazardous waste. User must test waste using methods described in 40 CFR Part 261 to determine if it meets applicable definitions of hazardous wastes.
B. Component Waste Numbers
No EPA Waste Numbers are applicable for this product's components.

Disposal Instructions
Used oil can be returned to a collection center or provided to a licensed recycler. All wastes must be handled in accordance with local, state and federal regulations.

Section 14 - TRANSPORTATION INFORMATION

DOT Information
Shipping Name: Not regulated as a hazardous material
Hazard Class: None
UN/NA #: None
Packing Group: None
Label(s) Required

Additional Shipping Information

International Transportation Regulations
Not regulated as dangerous goods.

Section 15 - REGULATORY INFORMATION

US Federal Regulations
A. General Product Information
All components of this product are listed on the U.S. EPA TSCA Inventory.
B. Component Information
None of this product's components are listed under SARA Section 302 (40 CFR 355 Appendix A), SARA Section 313 (40 CFR 372.65) or CERCLA (40 CFR 302.4).

State Regulations
A. General Product Information
No components require labeling under California Proposition 65.
B. Component Information
None of this product's components are listed on the state lists from CA, FL, MA, MN, NJ, or PA.

Continued on next page...

Other Regulations

A. General Product Information

This product is not considered a controlled product under the Canadian Controlled Products Act.

B. Component Information

None of this product's components are listed on the Canadian Controlled Product Ingredient Disclosure List.

Section 16 - OTHER INFORMATION

Other Information

This information is, to the best of Quaker State Corporation's knowledge and belief, accurate and reliable. However, no representation, warranty, or guarantee is made to its accuracy, reliability, or completeness. It is the user's responsibility to satisfy himself as to the suitableness and completeness of such information for his own particular use.

Preparation Information: last revised 11/01/94

Key/Legend

NA = Not Applicable; ND = Not Determined; Y = Yes; N = No

Contact Person: Vince Bernard, Corporate Safety Director
Phone: (214)868-0416

End of MSDS #QS-015

Print Date: 08/02/1996

Material Safety Data Sheet

Chevron Supreme Motor Oil

MSDS: 6717 **Revision #:** 3 **Revision Date:** 9/12/2002

Click here to search the product data sheet database

Material Safety Data Sheet

24-Hour Emergency Telephone Numbers
HEALTH : ChevronTexaco Emergency Information Center (800) 231-0623 or (510) 231-0623
TRANSPORTATION : CHEMTREC (800) 424-9300 or (703) 527-3887
Emergency Information Centers are located in the U.S.A. International collect calls accepted.

SECTION 1 PRODUCT AND COMPANY IDENTIFICATION

CHEVRON Supreme Motor Oil

Product Number(s): CPS220002, CPS220011, CPS220013, CPS220019, CPS220059, CPS220060, CPS220135
Synonyms: CHEVRON Supreme Motor Oil SAE 5W-20, CHEVRON Supreme Motor Oil SAE 5W-30, CHEVRON Supreme Motor Oil SAE 10W-30, CHEVRON Supreme Motor Oil SAE 10W-40, CHEVRON Supreme Motor Oil SAE 20W-50, CHEVRON Supreme Motor Oil SAE 30, CHEVRON Supreme Motor Oil SAE 40

Company Identification
ChevronTexaco Global Lubricants
6001 Bollinger Canyon Rd.

San Ramon, CA 94583
United States of America
www.chevron-lubricants.com

Product Information
MSDS Requests: (800) 414-6737
Product Information: (800) LUBE TEK
email : lubemsds@chevron.com

SECTION 2 COMPOSITION/ INFORMATION ON INGREDIENTS

COMPONENTS	CAS NUMBER	AMOUNT
Highly refined mineral oil (C15 - C50)	Mixture	75 - 94.99 %weight

Additives including	Mixture	10 - 24.99 %weight
Zinc dialkyldithiophosphate	68649-42-3	1 - 2.99 %weight

SECTION 3 HAZARDS IDENTIFICATION

****

EMERGENCY OVERVIEW

****

IMMEDIATE HEALTH EFFECTS
Eye: Not expected to cause prolonged or significant eye irritation.
Skin: Contact with the skin is not expected to cause prolonged or significant irritation. Not expected to be harmful to internal organs if absorbed through the skin.
Ingestion: Not expected to be harmful if swallowed.
Inhalation: Not expected to be harmful if inhaled. Contains a petroleum-based mineral oil. May cause respiratory irritation or other pulmonary effects following prolonged or repeated inhalation of oil mist at airborne levels above the recommended mineral oil mist exposure limit. Symptoms of respiratory irritation may include coughing and difficulty breathing.

SECTION 4 FIRST AID MEASURES

Eye: No specific first aid measures are required. As a precaution, remove contact lenses, if worn, and flush eyes with water.
Skin: No specific first aid measures are required. As a precaution, remove clothing and shoes if contaminated. To remove the material from skin, use soap and water. Discard contaminated clothing and shoes or thoroughly clean before reuse.
Ingestion: No specific first aid measures are required. Do not induce vomiting. As a precaution, get medical advice.
Inhalation: No specific first aid measures are required. If exposed to excessive levels of material in the air, move the exposed person to fresh air. Get medical attention if coughing or respiratory discomfort occurs.

SECTION 5 FIRE FIGHTING MEASURES

FIRE CLASSIFICATION:
OSHA Classification (29 CFR 1910.1200): Not classified by OSHA as flammable or combustible.

NFPA RATINGS: Health: 0 Flammability: 1 Reactivity: 0

FLAMMABLE PROPERTIES:
Flashpoint: (Cleveland Open Cup) 392 °F (200 °C) (Min)

Autoignition: NDA
Flammability (Explosive) Limits (% by volume in air): Lower: NA Upper: NA

EXTINGUISHING MEDIA: Use water fog, foam, dry chemical or carbon dioxide (CO2) to extinguish flames.

PROTECTION OF FIRE FIGHTERS:
Fire Fighting Instructions: This material will burn although it is not easily ignited. For fires involving this material, do not enter any enclosed or confined fire space without proper protective equipment, including self-contained breathing apparatus.
Combustion Products: Highly dependent on combustion conditions. A complex mixture of airborne solids, liquids, and gases including carbon monoxide, carbon dioxide, and unidentified organic compounds will be evolved when this material undergoes combustion. Combustion may form oxides of: Calcium, Sulfur, Zinc, Boron, Molybdenum, Nitrogen .

SECTION 6 ACCIDENTAL RELEASE MEASURES

Protective Measures: Eliminate all sources of ignition in vicinity of spilled material.
Spill Management: Stop the source of the release if you can do it without risk. Contain release to prevent further contamination of soil, surface water or groundwater. Clean up spill as soon as possible, observing precautions in Exposure Controls/Personal Protection. Use appropriate techniques such as applying non-combustible absorbent materials or pumping. Where feasible and appropriate, remove contaminated soil. Place contaminated materials in disposable containers and dispose of in a manner consistent with applicable regulations.
Reporting: Report spills to local authorities and/or the U.S. Coast Guard's National Response Center at (800) 424-8802 as appropriate or required.

SECTION 7 HANDLING AND STORAGE

Precautionary Measures: Keep out of the reach of children.
General Handling Information: Avoid contaminating soil or releasing this material into sewage and drainage systems and bodies of water.
Static Hazard: Electrostatic charge may accumulate and create a hazardous condition when handling this material. To minimize this hazard, bonding and grounding may be necessary but may not, by themselves, be sufficient. Review all operations which have the potential of generating an accumulation of electrostatic charge and/or a flammable atmosphere (including tank and container filling, splash filling, tank cleaning, sampling, gauging, switch loading, filtering, mixing, agitation, and vacuum truck operations) and use appropriate mitigating procedures. For more information, refer to OSHA Standard 29 CFR 1910.106, 'Flammable and Combustible Liquids', National Fire Protection Association (NFPA 77, 'Recommended Practice on Static Electricity', and/or the American Petroleum Institute (API) Recommended Practice 2003, 'Protection Against Ignitions Arising Out of Static, Lightning, and Stray Currents'.
Container Warnings: Container is not designed to contain pressure. Do not use pressure to empty container or it may rupture with explosive force. Empty containers retain product residue (solid, liquid, and/or vapor) and can be dangerous. Do not pressurize, cut, weld, braze, solder, drill, grind, or expose such containers to heat, flame, sparks, static electricity, or other sources of ignition. They may explode and cause injury or death. Empty containers should be completely drained, properly closed, and promptly returned to a drum reconditioner or disposed of properly.

SECTION 8 EXPOSURE CONTROLS/PERSONAL PROTECTION

GENERAL CONSIDERATIONS:
Consider the potential hazards of this material (see Section 3), applicable exposure limits, job activities, and other substances in the work place when designing engineering controls and selecting personal protective equipment. If engineering controls or work practices are not adequate to prevent exposure to harmful levels of this material, the personal protective equipment listed below is recommended. The user should read and understand all instructions and limitations supplied with the equipment since protection is usually provided for a

limited time or under certain circumstances.

Special note: Do not use in breathing air apparatus or medical equipment.

ENGINEERING CONTROLS:
Use in a well-ventilated area.

PERSONAL PROTECTIVE EQUIPMENT
Eye/Face Protection: No special eye protection is normally required. Where splashing is possible, wear safety glasses with side shields as a good safety practice.
Skin Protection: No special protective clothing is normally required. Where splashing is possible, select protective clothing depending on operations conducted, physical requirements and other substances. Suggested materials for protective gloves include: 4H (PE/EVAL), Nitrile Rubber, Silver Shield, Viton.
Respiratory Protection: No respiratory protection is normally required.
If user operations generate an oil mist, determine if airborne concentrations are below the occupational exposure limit for mineral oil mist. If not, wear an approved respirator that provides adequate protection from the measured concentrations of this material. For air-purifying respirators use a particulate cartridge.
Use a positive pressure air-supplying respirator in circumstances where air-purifying respirators may not provide adequate protection.

Occupational Exposure Limits:

Component	Limit	TWA	STEL	Ceiling	Notation
Highly refined mineral oil (C15 - C50)	ACGIH_TLV	5 mg/m3	10 mg/m3		
Highly refined mineral oil (C15 - C50)	OSHA_PEL	5 mg/m3			

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Attention: the data below are typical values and do not constitute a specification.

Color: Amber
Physical State: liquid
Odor: NDA
pH: NA
Vapor Pressure: <0.01 mmHg @ 100 °C
Vapor Density (Air = 1): >1
Boiling Point: >600 °F
Solubility: Soluble in hydrocarbons; insoluble in water
Freezing Point: NA
Melting Point: NA
Specific Gravity: 0.86 - 0.88 @ 15.6 °C / 15.6 °C
Viscosity: 8.3 cSt - 18.6 cSt @ 100 °C (Min)

SECTION 10 STABILITY AND REACTIVITY

Chemical Stability: This material is considered stable under normal ambient and anticipated storage and handling conditions of temperature and pressure.

Incompatibility With Other Materials: May react with strong oxidizing agents, such as chlorates, nitrates, peroxides, etc.
Hazardous Decomposition Products: Hydrogen Sulfide (Elevated temperatures)
Hazardous Polymerization: Hazardous polymerization will not occur.

SECTION 11 TOXICOLOGICAL INFORMATION

IMMEDIATE HEALTH EFFECTS

Eye Irritation: The eye irritation hazard is based on evaluation of data for similar materials or product components.
Skin Irritation: The skin irritation hazard is based on evaluation of data for similar materials or product components.
Skin Sensitization: No product toxicology data available.
Acute Dermal Toxicity: The acute dermal toxicity hazard is based on evaluation of data for similar materials or product components.
Acute Oral Toxicity: The acute oral toxicity hazard is based on evaluation of data for similar materials or product components.
Acute Inhalation Toxicity: The acute inhalation toxicity hazard is based on evaluation of data for similar materials or product components.

ADDITIONAL TOXICOLOGY INFORMATION:

This product contains petroleum base oils which may be refined by various processes including severe solvent extraction, severe hydrocracking, or severe hydrotreating. None of the oils requires a cancer warning under the OSHA Hazard Communication Standard (29 CFR 1910.1200). These oils have not been listed in the National Toxicology Program (NTP) Annual Report nor have they been classified by the International Agency for Research on Cancer (IARC) as; carcinogenic to humans (Group 1), probably carcinogenic to humans (Group 2A), or possibly carcinogenic to humans (Group 2B).

During use in engines, contamination of oil with low levels of cancer-causing combustion products occurs. Used motor oils have been shown to cause skin cancer in mice following repeated application and continuous exposure. Brief or intermittent skin contact with used motor oil is not expected to have serious effects in humans if the oil is thoroughly removed by washing with soap and water.

SECTION 12 ECOLOGICAL INFORMATION

ECOTOXICITY

The toxicity of this material to aquatic organisms has not been evaluated. Consequently, this material should be kept out of sewage and drainage systems and all bodies of water.

ENVIRONMENTAL FATE

This material is not expected to be readily biodegradable.

SECTION 13 DISPOSAL CONSIDERATIONS

Oil collection services are available for used oil recycling or disposal. Place contaminated materials in containers and dispose of in a manner consistent with applicable regulations. Contact your sales representative or local environmental or health authorities for approved disposal or recycling methods. (See B.C. Reg. GY/92 Waste Management Act; R.R.O. 1990, Reg. 347 General-Waste Management; C.C.SM.c. W40 The Waste Reduction and Prevention Act; N.S. Reg. 51/95 and N.S. Reg. 179/96 for examples of Provincial legislation.)

SECTION 14 TRANSPORT INFORMATION

The description shown may not apply to all shipping situations. Consult 49CFR, or appropriate Dangerous Goods Regulations, for additional description requirements (e.g., technical name) and mode-specific or quantity-specific shipping requirements.

DOT Shipping Name: NOT REGULATED AS A HAZARDOUS MATERIAL FOR TRANSPORTATION UNDER 49 CFR
DOT Hazard Class: NOT APPLICABLE
DOT Identification Number: NOT APPLICABLE
DOT Packing Group: NOT APPLICABLE
Additional Information: NOT HAZARDOUS BY U.S. DOT. ADR/RID HAZARD CLASS NOT APPLICABLE.

SECTION 15 REGULATORY INFORMATION

SARA 311/312 CATEGORIES:
1. Immediate (Acute) Health Effects: NO
2. Delayed (Chronic) Health Effects: NO
3. Fire Hazard: NO
4. Sudden Release of Pressure Hazard: NO
5. Reactivity Hazard: NO

REGULATORY LISTS SEARCHED:

4_I1=IARC Group 1	15=SARA Section 313
4_I2A=IARC Group 2A	16=CA Proposition 65
4_I2B=IARC Group 2B	17=MA RTK
05=NTP Carcinogen	18=NJ RTK
06=OSHA Carcinogen	19=DOT Marine Pollutant
09=TSCA 12(b)	20=PA RTK

The following components of this material are found on the regulatory lists indicated.

Zinc dialkyldithiophosphate 15

CERCLA REPORTABLE QUANTITIES(RQ)/SARA 302 THRESHOLD PLANNING QUANTITIES(TPQ):

Component	Component RQ	Component TPQ	Product RQ
Zinc dialkyldithiophosphate	1 lbs	None	98 lbs

CHEMICAL INVENTORIES:
CANADA: All the components of this material are on the Canadian DSL or have been notified under the New Substance Notification Regulations, but have not yet been published in the Canada Gazette.
EUROPEAN UNION: All the components of this material are in compliance with the EU Seventh Amendment

Directive 92/32/EEC.
UNITED STATES: All of the components of this material are on the Toxic Substances Control Act (TSCA) Chemical Inventory.

EU RISK AND SAFETY PHRASES: S56: Dispose of this material and its container at hazardous or special waste collection point.
S57: Use appropriate container to avoid environmental contamination.
S60: This material and its container must be disposed of as hazardous waste.
S61: Avoid release to the environment. Refer to special instructions/Safety data sheets.

NEW JERSEY RTK CLASSIFICATION:
Under the New Jersey Right-to-Know Act L. 1983 Chapter 315 N.J.S.A. 34:5A-1 et. seq., the product is to be identified as follows:
PETROLEUM OIL
(Motor oil)
WHMIS CLASSIFICATION:
This product is not considered a controlled product according to the criteria of the Canadian Controlled Products Regulations.

SECTION 16 OTHER INFORMATION

NFPA RATINGS: Health: 0 Flammability: 1 Reactivity: 0
HMIS RATINGS: Health: 1 Flammability: 1 Reactivity: 0

(0-Least, 1-Slight, 2-Moderate, 3-High, 4-Extreme, PPE:- Personal Protection Equipment Index recommendation, *- Chronic Effect Indicator). These values are obtained using the guidelines or published evaluations prepared by the National Fire Protection Association (NFPA) or the National Paint and Coating Association (for HMIS ratings).

REVISION STATEMENT: Changes have been made throughout this Material Safety Data Sheet. Please read the entire document.

ABBREVIATIONS THAT MAY HAVE BEEN USED IN THIS DOCUMENT:

TLV	-	Threshold Limit Value	TWA	-	Time Weighted Average
STEL	-	Short-term Exposure Limit	PEL	-	Permissible Exposure Limit
			CAS	-	Chemical Abstract Service Number
NDA	-	No Data Available	NA	-	Not Applicable
<=	-	Less Than or Equal To	>=	-	Greater Than or Equal To

Prepared according to the OSHA Hazard Communication Standard (29 CFR 1910.1200) and the ANSI MSDS Standard (Z400.1).

The above information is based on the data of which we are aware and is believed to be correct as of the date hereof. Since this information may be applied under conditions beyond our control and with which we may be unfamiliar and since data made available subsequent to the date hereof may suggest modifications of the information, we do not assume any responsibility for the results of its use. This information is furnished upon condition that the person receiving it shall make his own determination of the suitability of the material for his particular purpose.

Material Safety Data Sheet

Chevron RPM® Heavy Duty Motor Oil

MSDS: 6931 **Revision #:** 4 **Revision Date:** 8/16/2002

Click here to search the product data sheet database

Material Safety Data Sheet

24-Hour Emergency Telephone Numbers
HEALTH : ChevronTexaco Emergency Information Center (800) 231-0623 or (510) 231-0623
TRANSPORTATION : CHEMTREC (800) 424-9300 or (703) 527-3887
Emergency Information Centers are located in the U.S.A. International collect calls accepted.

SECTION 1 PRODUCT AND COMPANY IDENTIFICATION

CHEVRON RPM® Heavy Duty Motor Oil

Product Number(s): CPS225043, CPS225044, CPS225046, CPS225047, CPS225048, CPS242000
Synonyms: CHEVRON RPM® Heavy Duty Motor Oil SAE 10W, CHEVRON RPM® Heavy Duty Motor Oil SAE 10W-30, CHEVRON RPM® Heavy Duty Motor Oil SAE 15W-40, CHEVRON RPM® Heavy Duty Motor Oil SAE 30, CHEVRON RPM® Heavy Duty Motor Oil SAE 40, CHEVRON RPM® Heavy Duty Motor Oil SAE 50

Company Identification
ChevronTexaco Global Lubricants
6001 Bollinger Canyon Rd.
San Ramon, CA 94583
United States of America
www.chevron-lubricants.com

Product Information
MSDS Requests: (800) 414-6737
Product Information: (800) LUBE TEK
email : lubemsds@chevron.com

SECTION 2 COMPOSITION/ INFORMATION ON INGREDIENTS

COMPONENTS	CAS NUMBER	AMOUNT
Highly refined mineral oil (C15 - C50)	Mixture	75 - 89.99 %weight

Additives	Mixture	10 - 24.99 %weight
Zinc dialkyldithiophosphate	68649-42-3	1 - 4.99 %weight
Alkylated Phenol	Proprietary	0.1 - 0.99 %weight

SECTION 3 HAZARDS IDENTIFICATION

****

EMERGENCY OVERVIEW

Dark brown liquid.

****

IMMEDIATE HEALTH EFFECTS

Eye: Not expected to cause prolonged or significant eye irritation.

Skin: Contact with the skin is not expected to cause prolonged or significant irritation. Not expected to be harmful to internal organs if absorbed through the skin.

Ingestion: Not expected to be harmful if swallowed.

Inhalation: Not expected to be harmful if inhaled. Contains a petroleum-based mineral oil. May cause respiratory irritation or other pulmonary effects following prolonged or repeated inhalation of oil mist at airborne levels above the recommended mineral oil mist exposure limit. Symptoms of respiratory irritation may include coughing and difficulty breathing.

SECTION 4 FIRST AID MEASURES

Eye: No specific first aid measures are required. As a precaution, remove contact lenses, if worn, and flush eyes with water.

Skin: No specific first aid measures are required. As a precaution, remove clothing and shoes if contaminated. To remove the material from skin, use soap and water. Discard contaminated clothing and shoes or thoroughly clean before reuse.

Ingestion: No specific first aid measures are required. Do not induce vomiting. As a precaution, get medical advice.

Inhalation: No specific first aid measures are required. If exposed to excessive levels of material in the air, move the exposed person to fresh air. Get medical attention if coughing or respiratory discomfort occurs.

SECTION 5 FIRE FIGHTING MEASURES

FIRE CLASSIFICATION:

OSHA Classification (29 CFR 1910.1200): Not classified by OSHA as flammable or combustible.

NFPA RATINGS: Health: 0 Flammability: 1 Reactivity: 0

FLAMMABLE PROPERTIES:

Flashpoint: 399 °F (204 °C) (Min)

Autoignition: NDA

Flammability (Explosive) Limits (% by volume in air): Lower: NA Upper: NA

EXTINGUISHING MEDIA: Use water fog, foam, dry chemical or carbon dioxide (CO2) to extinguish flames.

PROTECTION OF FIRE FIGHTERS:

Fire Fighting Instructions: This material will burn although it is not easily ignited. For fires involving this

material, do not enter any enclosed or confined fire space without proper protective equipment, including self-contained breathing apparatus.
Combustion Products: Highly dependent on combustion conditions. A complex mixture of airborne solids, liquids, and gases including carbon monoxide, carbon dioxide, and unidentified organic compounds will be evolved when this material undergoes combustion. Combustion may form oxides of: Calcium, Sulfur, Phosphorus .

SECTION 6 ACCIDENTAL RELEASE MEASURES

Protective Measures: Eliminate all sources of ignition in vicinity of spilled material.
Spill Management: Stop the source of the release if you can do it without risk. Contain release to prevent further contamination of soil, surface water or groundwater. Clean up spill as soon as possible, observing precautions in Exposure Controls/Personal Protection. Use appropriate techniques such as applying non-combustible absorbent materials or pumping. Where feasible and appropriate, remove contaminated soil. Place contaminated materials in disposable containers and dispose of in a manner consistent with applicable regulations.
Reporting: Report spills to local authorities and/or the U.S. Coast Guard's National Response Center at (800) 424-8802 as appropriate or required.

SECTION 7 HANDLING AND STORAGE

Precautionary Measures: Keep out of the reach of children.
General Handling Information: Avoid contaminating soil or releasing this material into sewage and drainage systems and bodies of water.
Static Hazard: Electrostatic charge may accumulate and create a hazardous condition when handling this material. To minimize this hazard, bonding and grounding may be necessary but may not, by themselves, be sufficient. Review all operations which have the potential of generating an accumulation of electrostatic charge and/or a flammable atmosphere (including tank and container filling, splash filling, tank cleaning, sampling, gauging, switch loading, filtering, mixing, agitation, and vacuum truck operations) and use appropriate mitigating procedures. For more information, refer to OSHA Standard 29 CFR 1910.106, 'Flammable and Combustible Liquids', National Fire Protection Association (NFPA 77, 'Recommended Practice on Static Electricity', and/or the American Petroleum Institute (API) Recommended Practice 2003, 'Protection Against Ignitions Arising Out of Static, Lightning, and Stray Currents'.
Container Warnings: Container is not designed to contain pressure. Do not use pressure to empty container or it may rupture with explosive force. Empty containers retain product residue (solid, liquid, and/or vapor) and can be dangerous. Do not pressurize, cut, weld, braze, solder, drill, grind, or expose such containers to heat, flame, sparks, static electricity, or other sources of ignition. They may explode and cause injury or death. Empty containers should be completely drained, properly closed, and promptly returned to a drum reconditioner or disposed of properly.

SECTION 8 EXPOSURE CONTROLS/PERSONAL PROTECTION

GENERAL CONSIDERATIONS:
Consider the potential hazards of this material (see Section 3), applicable exposure limits, job activities, and other substances in the work place when designing engineering controls and selecting personal protective equipment. If engineering controls or work practices are not adequate to prevent exposure to harmful levels of this material, the personal protective equipment listed below is recommended. The user should read and understand all instructions and limitations supplied with the equipment since protection is usually provided for a limited time or under certain circumstances.

Special note: Do not use in breathing air apparatus or medical equipment.

ENGINEERING CONTROLS:
Use in a well-ventilated area.

PERSONAL PROTECTIVE EQUIPMENT
Eye/Face Protection: No special eye protection is normally required. Where splashing is possible, wear safety glasses with side shields as a good safety practice.
Skin Protection: No special protective clothing is normally required. Where splashing is possible, select protective clothing depending on operations conducted, physical requirements and other substances. Suggested materials for protective gloves include: 4H (PE/EVAL), Nitrile Rubber, Silver Shield, Viton.
Respiratory Protection: No respiratory protection is normally required.
If user operations generate an oil mist, determine if airborne concentrations are below the occupational exposure limit for mineral oil mist. If not, wear an approved respirator that provides adequate protection from the measured concentrations of this material. For air-purifying respirators use a particulate cartridge.
Use a positive pressure air-supplying respirator in circumstances where air-purifying respirators may not provide adequate protection.

Occupational Exposure Limits:

Component	Limit	TWA	STEL	Ceiling	Notation
Highly refined mineral oil (C15 - C50)	ACGIH_TLV	5 mg/m3	10 mg/m3		
Highly refined mineral oil (C15 - C50)	OSHA_PEL	5 mg/m3			

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Attention: the data below are typical values and do not constitute a specification.

Appearance and Odor: Dark brown liquid.
pH: NA
Vapor Pressure: <0.01 mmHg @ 100 °F
Vapor Density (Air = 1): >1
Boiling Point: >600 °F (>315 C)
Solubility: Soluble in hydrocarbons; insoluble in water
Freezing Point: NA
Melting Point: NA
Specific Gravity: 0.87 - 0.89 @ 15.6 °C / 15.6 °C
Viscosity: 5.9 cSt - 16.3 cSt @ 100 °C (Min)

SECTION 10 STABILITY AND REACTIVITY

Chemical Stability: This material is considered stable under normal ambient and anticipated storage and handling conditions of temperature and pressure.
Incompatibility With Other Materials: May react with strong oxidizing agents, such as chlorates, nitrates, peroxides, etc.
Hazardous Decomposition Products: Hydrogen Sulfide (Elevated temperatures)
Hazardous Polymerization: Hazardous polymerization will not occur.

SECTION 11 TOXICOLOGICAL INFORMATION

IMMEDIATE HEALTH EFFECTS
Eye Irritation: The eye irritation hazard is based on evaluation of data for similar materials or product

components.
Skin Irritation: The skin irritation hazard is based on evaluation of data for similar materials or product components.
Skin Sensitization: No product toxicology data available.
Acute Dermal Toxicity: The acute dermal toxicity hazard is based on evaluation of data for similar materials or product components.
Acute Oral Toxicity: The acute oral toxicity hazard is based on evaluation of data for similar materials or product components.
Acute Inhalation Toxicity: The acute inhalation toxicity hazard is based on evaluation of data for similar materials or product components.

ADDITIONAL TOXICOLOGY INFORMATION:
This product contains petroleum base oils which may be refined by various processes including severe solvent extraction, severe hydrocracking, or severe hydrotreating. None of the oils requires a cancer warning under the OSHA Hazard Communication Standard (29 CFR 1910.1200). These oils have not been listed in the National Toxicology Program (NTP) Annual Report nor have they been classified by the International Agency for Research on Cancer (IARC) as; carcinogenic to humans (Group 1), probably carcinogenic to humans (Group 2A), or possibly carcinogenic to humans (Group 2B).

During use in engines, contamination of oil with low levels of cancer-causing combustion products occurs. Used motor oils have been shown to cause skin cancer in mice following repeated application and continuous exposure. Brief or intermittent skin contact with used motor oil is not expected to have serious effects in humans if the oil is thoroughly removed by washing with soap and water.

SECTION 12 ECOLOGICAL INFORMATION

ECOTOXICITY
The toxicity of this material to aquatic organisms has not been evaluated. Consequently, this material should be kept out of sewage and drainage systems and all bodies of water.

ENVIRONMENTAL FATE
This material is not expected to be readily biodegradable.

SECTION 13 DISPOSAL CONSIDERATIONS

Oil collection services are available for used oil recycling or disposal. Place contaminated materials in containers and dispose of in a manner consistent with applicable regulations. Contact your sales representative or local environmental or health authorities for approved disposal or recycling methods. (See B.C. Reg. GY/92 Waste Management Act; R.R.O. 1990, Reg. 347 General-Waste Management; C.C.SM.c. W40 The Waste Reduction and Prevention Act; N.S. Reg. 51/95 and N.S. Reg. 179/96 for examples of Provincial legislation.)

SECTION 14 TRANSPORT INFORMATION

The description shown may not apply to all shipping situations. Consult 49CFR, or appropriate Dangerous Goods Regulations, for additional description requirements (e.g., technical name) and mode-specific or quantity-specific shipping requirements.

DOT Shipping Name: NOT REGULATED AS A HAZARDOUS MATERIAL FOR TRANSPORTATION UNDER 49 CFR
DOT Hazard Class: NOT APPLICABLE
DOT Identification Number: NOT APPLICABLE
DOT Packing Group: NOT APPLICABLE
Additional Information: NOT HAZARDOUS BY U.S. DOT. ADR/RID HAZARD CLASS NOT APPLICABLE.

SECTION 15 REGULATORY INFORMATION

SARA 311/312 CATEGORIES:

1. Immediate (Acute) Health Effects: NO
2. Delayed (Chronic) Health Effects: NO
3. Fire Hazard: NO
4. Sudden Release of Pressure Hazard: NO
5. Reactivity Hazard: NO

REGULATORY LISTS SEARCHED:

4_I1=IARC Group 1	15=SARA Section 313
4_I2A=IARC Group 2A	16=CA Proposition 65
4_I2B=IARC Group 2B	17=MA RTK
05=NTP Carcinogen	18=NJ RTK
06=OSHA Carcinogen	19=DOT Marine Pollutant
09=TSCA 12(b)	20=PA RTK

The following components of this material are found on the regulatory lists indicated.

Alkylated Phenol	9
Zinc dialkyldithiophosphate	15

CERCLA REPORTABLE QUANTITIES(RQ)/SARA 302 THRESHOLD PLANNING QUANTITIES(TPQ):

Component	Component RQ	Component TPQ	Product RQ
Zinc dialkyldithiophosphate	1 lbs	None	37 lbs

CHEMICAL INVENTORIES:
CANADA: All the components of this material are on the Canadian DSL or have been notified under the New Substance Notification Regulations, but have not yet been published in the Canada Gazette.
UNITED STATES: All of the components of this material are on the Toxic Substances Control Act (TSCA) Chemical Inventory.

NEW JERSEY RTK CLASSIFICATION:
Under the New Jersey Right-to-Know Act L. 1983 Chapter 315 N.J.S.A. 34:5A-1 et. seq., the product is to be identified as follows:
PETROLEUM OIL (Motor oil)

WHMIS CLASSIFICATION:
This product is not considered a controlled product according to the criteria of the Canadian Controlled Products Regulations.

SECTION 16 OTHER INFORMATION

NFPA RATINGS: Health: 0 Flammability: 1 Reactivity: 0
HMIS RATINGS: Health: 1 Flammability: 1 Reactivity: 0

(0-Least, 1-Slight, 2-Moderate, 3-High, 4-Extreme, PPE:- Personal Protection Equipment Index recommendation, *- Chronic Effect Indicator). These values are obtained using the guidelines or published evaluations prepared by the National Fire Protection Association (NFPA) or the National Paint and Coating Association (for HMIS ratings).

REVISION STATEMENT: Changes have been made throughout this Material Safety Data Sheet. Please read the entire document.

ABBREVIATIONS THAT MAY HAVE BEEN USED IN THIS DOCUMENT:

TLV	- Threshold Limit Value	TWA	- Time Weighted Average
STEL	- Short-term Exposure Limit	PEL	- Permissible Exposure Limit
		CAS	- Chemical Abstract Service Number
NDA	- No Data Available	NA	- Not Applicable
<=	- Less Than or Equal To	>=	- Greater Than or Equal To

Prepared according to the OSHA Hazard Communication Standard (29 CFR 1910.1200) and the ANSI MSDS Standard (Z400.1).

The above information is based on the data of which we are aware and is believed to be correct as of the date hereof. Since this information may be applied under conditions beyond our control and with which we may be unfamiliar and since data made available subsequent to the date hereof may suggest modifications of the information, we do not assume any responsibility for the results of its use. This information is furnished upon condition that the person receiving it shall make his own determination of the suitability of the material for his particular purpose.

Material Safety Data Sheet

Chevron Delo® 400

MSDS: 6711 **Revision #:** 4 **Revision Date:** 8/16/2002

Click here to search the product data sheet database

Material Safety Data Sheet

24-Hour Emergency Telephone Numbers
HEALTH : ChevronTexaco Emergency Information Center (800) 231-0623 or (510) 231-0623
TRANSPORTATION : CHEMTREC (800) 424-9300 or (703) 527-3887
Emergency Information Centers are located in the U.S.A. International collect calls accepted.

SECTION 1 PRODUCT AND COMPANY IDENTIFICATION

CHEVRON Delo® 400

Product Number(s): CPS235101, CPS235109, CPS235117, CPS235118, CPS235119, CPS235120, CPS235200
Synonyms: CHEVRON Delo® 400 Multigrade SAE 15W-40, CHEVRON Delo® 400 SAE 10W, CHEVRON Delo® 400 SAE 10W-30, CHEVRON Delo® 400 SAE 20, CHEVRON Delo® 400 SAE 30, CHEVRON Delo® 400 SAE 40, CHEVRON Delo® 400 SAE 50

Company Identification
ChevronTexaco Global Lubricants
6001 Bollinger Canyon Rd.
San Ramon, CA 94583
United States of America
www.chevron-lubricants.com

Product Information
MSDS Requests: (800) 414-6737
Product Information: (800) LUBE TEK
email : lubemsds@chevron.com

SECTION 2 COMPOSITION/ INFORMATION ON INGREDIENTS

COMPONENTS	CAS NUMBER	AMOUNT
Highly refined mineral oil (C15 - C50)	Mixture	70 - 94.99 %weight

Zinc dialkyldithiophosphate	68649-42-3	1 - 4.99 %weight

SECTION 3 HAZARDS IDENTIFICATION

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EMERGENCY OVERVIEW

Dark brown liquid.

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IMMEDIATE HEALTH EFFECTS

Eye: Not expected to cause prolonged or significant eye irritation.
Skin: Contact with the skin is not expected to cause prolonged or significant irritation. Not expected to be harmful to internal organs if absorbed through the skin.
Ingestion: Not expected to be harmful if swallowed.
Inhalation: Not expected to be harmful if inhaled. Contains a petroleum-based mineral oil. May cause respiratory irritation or other pulmonary effects following prolonged or repeated inhalation of oil mist at airborne levels above the recommended mineral oil mist exposure limit. Symptoms of respiratory irritation may include coughing and difficulty breathing.

SECTION 4 FIRST AID MEASURES

Eye: No specific first aid measures are required. As a precaution, remove contact lenses, if worn, and flush eyes with water.
Skin: No specific first aid measures are required. As a precaution, remove clothing and shoes if contaminated. To remove the material from skin, use soap and water. Discard contaminated clothing and shoes or thoroughly clean before reuse.
Ingestion: No specific first aid measures are required. Do not induce vomiting. As a precaution, get medical advice.
Inhalation: No specific first aid measures are required. If exposed to excessive levels of material in the air, move the exposed person to fresh air. Get medical attention if coughing or respiratory discomfort occurs.

SECTION 5 FIRE FIGHTING MEASURES

FIRE CLASSIFICATION:
OSHA Classification (29 CFR 1910.1200): Not classified by OSHA as flammable or combustible.

NFPA RATINGS: Health: 0 Flammability: 1 Reactivity: 0

FLAMMABLE PROPERTIES:
Flashpoint: (Cleveland Open Cup) 392 °F (200 °C) (Min)
Autoignition: NDA
Flammability (Explosive) Limits (% by volume in air): Lower: NA Upper: NA

EXTINGUISHING MEDIA: Use water fog, foam, dry chemical or carbon dioxide (CO2) to extinguish flames.

PROTECTION OF FIRE FIGHTERS:
Fire Fighting Instructions: This material will burn although it is not easily ignited. For fires involving this material, do not enter any enclosed or confined fire space without proper protective equipment, including self-contained breathing apparatus.
Combustion Products: Highly dependent on combustion conditions. A complex mixture of airborne solids, liquids, and gases including carbon monoxide, carbon dioxide, and unidentified organic compounds will be evolved when this material undergoes combustion. Combustion may form oxides of: Nitrogen, Phosphorus,

Sulfur .

SECTION 6 ACCIDENTAL RELEASE MEASURES

Protective Measures: Eliminate all sources of ignition in vicinity of spilled material.
Spill Management: Stop the source of the release if you can do it without risk. Contain release to prevent further contamination of soil, surface water or groundwater. Clean up spill as soon as possible, observing precautions in Exposure Controls/Personal Protection. Use appropriate techniques such as applying non-combustible absorbent materials or pumping. Where feasible and appropriate, remove contaminated soil. Place contaminated materials in disposable containers and dispose of in a manner consistent with applicable regulations.
Reporting: Report spills to local authorities and/or the U.S. Coast Guard's National Response Center at (800) 424-8802 as appropriate or required.

SECTION 7 HANDLING AND STORAGE

Precautionary Measures: Keep out of the reach of children.
General Handling Information: Avoid contaminating soil or releasing this material into sewage and drainage systems and bodies of water.
Static Hazard: Electrostatic charge may accumulate and create a hazardous condition when handling this material. To minimize this hazard, bonding and grounding may be necessary but may not, by themselves, be sufficient. Review all operations which have the potential of generating an accumulation of electrostatic charge and/or a flammable atmosphere (including tank and container filling, splash filling, tank cleaning, sampling, gauging, switch loading, filtering, mixing, agitation, and vacuum truck operations) and use appropriate mitigating procedures. For more information, refer to OSHA Standard 29 CFR 1910.106, 'Flammable and Combustible Liquids', National Fire Protection Association (NFPA 77, 'Recommended Practice on Static Electricity', and/or the American Petroleum Institute (API) Recommended Practice 2003, 'Protection Against Ignitions Arising Out of Static, Lightning, and Stray Currents'.
Container Warnings: Container is not designed to contain pressure. Do not use pressure to empty container or it may rupture with explosive force. Empty containers retain product residue (solid, liquid, and/or vapor) and can be dangerous. Do not pressurize, cut, weld, braze, solder, drill, grind, or expose such containers to heat, flame, sparks, static electricity, or other sources of ignition. They may explode and cause injury or death. Empty containers should be completely drained, properly closed, and promptly returned to a drum reconditioner or disposed of properly.

SECTION 8 EXPOSURE CONTROLS/PERSONAL PROTECTION

GENERAL CONSIDERATIONS:
Consider the potential hazards of this material (see Section 3), applicable exposure limits, job activities, and other substances in the work place when designing engineering controls and selecting personal protective equipment. If engineering controls or work practices are not adequate to prevent exposure to harmful levels of this material, the personal protective equipment listed below is recommended. The user should read and understand all instructions and limitations supplied with the equipment since protection is usually provided for a limited time or under certain circumstances.

Special note: Do not use in breathing air apparatus or medical equipment.

ENGINEERING CONTROLS:
Use in a well-ventilated area.

PERSONAL PROTECTIVE EQUIPMENT
Eye/Face Protection: No special eye protection is normally required. Where splashing is possible, wear safety glasses with side shields as a good safety practice.
Skin Protection: No special protective clothing is normally required. Where splashing is possible, select protective clothing depending on operations conducted, physical requirements and other substances. Suggested

materials for protective gloves include: 4H (PE/EVAL), Nitrile Rubber, Silver Shield, Viton.
Respiratory Protection: No respiratory protection is normally required.
If user operations generate an oil mist, determine if airborne concentrations are below the occupational exposure limit for mineral oil mist. If not, wear an approved respirator that provides adequate protection from the measured concentrations of this material. For air-purifying respirators use a particulate cartridge.
Use a positive pressure air-supplying respirator in circumstances where air-purifying respirators may not provide adequate protection.

Occupational Exposure Limits:

Component	Limit	TWA	STEL	Ceiling	Notation
Highly refined mineral oil (C15 - C50)	ACGIH_TLV	5 mg/m3	10 mg/m3		
Highly refined mineral oil (C15 - C50)	OSHA_PEL	5 mg/m3			

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Attention: the data below are typical values and do not constitute a specification.

Appearance and Odor: Dark brown liquid.
pH: NA
Vapor Pressure: <0.01 mmHg @ 100 °F
Vapor Density (Air = 1): >1
Boiling Point: >600 °F (>315 C)
Solubility: Soluble in hydrocarbons; insoluble in water
Freezing Point: NA
Melting Point: NA
Specific Gravity: 0.88 - 0.88 @ 15.6 °C / 15.6 °C
Volatile Organic Compounds (VOC) : 1.1 %weight
Viscosity: 5 cSt - 18 cSt @ 100 °C (Min)

SECTION 10 STABILITY AND REACTIVITY

Chemical Stability: This material is considered stable under normal ambient and anticipated storage and handling conditions of temperature and pressure.
Incompatibility With Other Materials: May react with strong oxidizing agents, such as chlorates, nitrates, peroxides, etc.
Hazardous Decomposition Products: Hydrogen Sulfide (Elevated temperatures)
Hazardous Polymerization: Hazardous polymerization will not occur.

SECTION 11 TOXICOLOGICAL INFORMATION

IMMEDIATE HEALTH EFFECTS
Eye Irritation: The eye irritation hazard is based on evaluation of data for similar materials or product components.
Skin Irritation: The skin irritation hazard is based on evaluation of data for similar materials or product components.

Skin Sensitization: No product toxicology data available.
Acute Dermal Toxicity: The acute dermal toxicity hazard is based on evaluation of data for similar materials or product components.
Acute Oral Toxicity: The acute oral toxicity hazard is based on evaluation of data for similar materials or product components.
Acute Inhalation Toxicity: The acute inhalation toxicity hazard is based on evaluation of data for similar materials or product components.

ADDITIONAL TOXICOLOGY INFORMATION:
This product contains petroleum base oils which may be refined by various processes including severe solvent extraction, severe hydrocracking, or severe hydrotreating. None of the oils requires a cancer warning under the OSHA Hazard Communication Standard (29 CFR 1910.1200). These oils have not been listed in the National Toxicology Program (NTP) Annual Report nor have they been classified by the International Agency for Research on Cancer (IARC) as; carcinogenic to humans (Group 1), probably carcinogenic to humans (Group 2A), or possibly carcinogenic to humans (Group 2B).

During use in engines, contamination of oil with low levels of cancer-causing combustion products occurs. Used motor oils have been shown to cause skin cancer in mice following repeated application and continuous exposure. Brief or intermittent skin contact with used motor oil is not expected to have serious effects in humans if the oil is thoroughly removed by washing with soap and water.

SECTION 12 ECOLOGICAL INFORMATION

ECOTOXICITY
The toxicity of this material to aquatic organisms has not been evaluated. Consequently, this material should be kept out of sewage and drainage systems and all bodies of water.

ENVIRONMENTAL FATE
This material is not expected to be readily biodegradable.

SECTION 13 DISPOSAL CONSIDERATIONS

Oil collection services are available for used oil recycling or disposal. Place contaminated materials in containers and dispose of in a manner consistent with applicable regulations. Contact your sales representative or local environmental or health authorities for approved disposal or recycling methods. (See B.C. Reg. GY/92 Waste Management Act; R.R.O. 1990, Reg. 347 General-Waste Management; C.C.SM.c. W40 The Waste Reduction and Prevention Act; N.S. Reg. 51/95 and N.S. Reg. 179/96 for examples of Provincial legislation.)

SECTION 14 TRANSPORT INFORMATION

The description shown may not apply to all shipping situations. Consult 49CFR, or appropriate Dangerous Goods Regulations, for additional description requirements (e.g., technical name) and mode-specific or quantity-specific shipping requirements.

DOT Shipping Name: NOT REGULATED AS A HAZARDOUS MATERIAL FOR TRANSPORTATION UNDER 49 CFR
DOT Hazard Class: NOT APPLICABLE
DOT Identification Number: NOT APPLICABLE
DOT Packing Group: NOT APPLICABLE
Additional Information: NOT HAZARDOUS BY U.S. DOT. ADR/RID HAZARD CLASS NOT APPLICABLE.

SECTION 15 REGULATORY INFORMATION

SARA 311/312 CATEGORIES:

1. Immediate (Acute) Health Effects: NO
2. Delayed (Chronic) Health Effects: NO
3. Fire Hazard: NO
4. Sudden Release of Pressure Hazard: NO
5. Reactivity Hazard: NO

REGULATORY LISTS SEARCHED:

4_I1=IARC Group 1	15=SARA Section 313
4_I2A=IARC Group 2A	16=CA Proposition 65
4_I2B=IARC Group 2B	17=MA RTK
05=NTP Carcinogen	18=NJ RTK
06=OSHA Carcinogen	19=DOT Marine Pollutant
09=TSCA 12(b)	20=PA RTK

The following components of this material are found on the regulatory lists indicated.

Zinc dialkyldithiophosphate 15

CERCLA REPORTABLE QUANTITIES(RQ)/SARA 302 THRESHOLD PLANNING QUANTITIES(TPQ):

Component	Component RQ	Component TPQ	Product RQ
Zinc dialkyldithiophosphate	1 lbs	None	22 lbs

CHEMICAL INVENTORIES:
CANADA: All the components of this material are on the Canadian DSL or have been notified under the New Substance Notification Regulations, but have not yet been published in the Canada Gazette.
PEOPLE'S REPUBLIC OF CHINA: All the components of this product are listed on the draft Inventory of Existing Chemical Substances in China.
EUROPEAN UNION: All the components of this material are in compliance with the EU Seventh Amendment Directive 92/32/EEC.
JAPAN: All the components of this product are on the Existing & New Chemical Substances (ENCS) inventory in Japan, or have an exemption from listing.
KOREA: All the components of this product are on the Existing Chemicals List (ECL) in Korea.
PHILIPPINES: All the components of this product are listed on the Philippine Inventory of Chemicals and Chemical Substances (PICCS).
UNITED STATES: All of the components of this material are on the Toxic Substances Control Act (TSCA) Chemical Inventory.

NEW JERSEY RTK CLASSIFICATION:
Under the New Jersey Right-to-Know Act L. 1983 Chapter 315 N.J.S.A. 34:5A-1 et. seq., the product is to be identified as follows:
PETROLEUM OIL (Motor oil)
WHMIS CLASSIFICATION:
This product is not considered a controlled product according to the criteria of the Canadian Controlled Products

Regulations.

SECTION 16 OTHER INFORMATION

NFPA RATINGS: Health: 0 Flammability: 1 Reactivity: 0
HMIS RATINGS: Health: 1 Flammability: 1 Reactivity: 0

(0-Least, 1-Slight, 2-Moderate, 3-High, 4-Extreme, PPE:- Personal Protection Equipment Index recommendation, *- Chronic Effect Indicator). These values are obtained using the guidelines or published evaluations prepared by the National Fire Protection Association (NFPA) or the National Paint and Coating Association (for HMIS ratings).

REVISION STATEMENT: Changes have been made throughout this Material Safety Data Sheet. Please read the entire document.

ABBREVIATIONS THAT MAY HAVE BEEN USED IN THIS DOCUMENT:

TLV	- Threshold Limit Value	TWA	- Time Weighted Average
STEL	- Short-term Exposure Limit	PEL	- Permissible Exposure Limit
		CAS	- Chemical Abstract Service Number
NDA	- No Data Available	NA	- Not Applicable
<=	- Less Than or Equal To	>=	- Greater Than or Equal To

Prepared according to the OSHA Hazard Communication Standard (29 CFR 1910.1200) and the ANSI MSDS Standard (Z400.1).

The above information is based on the data of which we are aware and is believed to be correct as of the date hereof. Since this information may be applied under conditions beyond our control and with which we may be unfamiliar and since data made available subsequent to the date hereof may suggest modifications of the information, we do not assume any responsibility for the results of its use. This information is furnished upon condition that the person receiving it shall make his own determination of the suitability of the material for his particular purpose.

Material Safety Data Sheet

Chevron Hydraulic Oil AW ISO 32, 46, 68

MSDS: 7457 **Revision #:** 5 **Revision Date:** 8/20/2002

Click here to search the product data sheet database

Material Safety Data Sheet

24-Hour Emergency Telephone Numbers
HEALTH : ChevronTexaco Emergency Information Center (800) 231-0623 or (510) 231-0623
TRANSPORTATION : CHEMTREC (800) 424-9300 or (703) 527-3887
Emergency Information Centers are located in the U.S.A. International collect calls accepted.

SECTION 1 PRODUCT AND COMPANY IDENTIFICATION

CHEVRON Hydraulic Oil AW

Product Number(s): CPS255673, CPS255674, CPS255675
Synonyms: CHEVRON AW Hydraulic Oil ISO 32, CHEVRON AW Hydraulic Oil ISO 46, CHEVRON AW Hydraulic Oil ISO 68

Company Identification
ChevronTexaco Global Lubricants
6001 Bollinger Canyon Rd.
San Ramon, CA 94583
United States of America
www.chevron-lubricants.com

Product Information
MSDS Requests: (800) 414-6737
Product Information: (800) LUBE TEK
email : lubemsds@chevron.com

SECTION 2 COMPOSITION/ INFORMATION ON INGREDIENTS

COMPONENTS	CAS NUMBER	AMOUNT
Non-hazardous additive blend in refined oil	Mixture	100 %weight

SECTION 3 HAZARDS IDENTIFICATION

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EMERGENCY OVERVIEW

Pale yellow liquid.

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IMMEDIATE HEALTH EFFECTS

Eye: Not expected to cause prolonged or significant eye irritation.

Skin: Contact with the skin is not expected to cause prolonged or significant irritation. Not expected to be harmful to internal organs if absorbed through the skin. High-Pressure Equipment Information: Accidental high-velocity injection under the skin of materials of this type may result in serious injury. Seek medical attention at once should an accident like this occur. The initial wound at the injection site may not appear to be serious at first; but, if left untreated, could result in disfigurement or amputation of the affected part.

Ingestion: Not expected to be harmful if swallowed.

Inhalation: Not expected to be harmful if inhaled. Contains a petroleum-based mineral oil. May cause respiratory irritation or other pulmonary effects following prolonged or repeated inhalation of oil mist at airborne levels above the recommended mineral oil mist exposure limit. Symptoms of respiratory irritation may include coughing and difficulty breathing.

SECTION 4 FIRST AID MEASURES

Eye: No specific first aid measures are required. As a precaution, remove contact lenses, if worn, and flush eyes with water.

Skin: No specific first aid measures are required. As a precaution, remove clothing and shoes if contaminated. To remove the material from skin, use soap and water. Discard contaminated clothing and shoes or thoroughly clean before reuse.

Ingestion: No specific first aid measures are required. Do not induce vomiting. As a precaution, get medical advice.

Inhalation: No specific first aid measures are required. If exposed to excessive levels of material in the air, move the exposed person to fresh air. Get medical attention if coughing or respiratory discomfort occurs.

Note to Physicians: In an accident involving high-pressure equipment, this product may be injected under the skin. Such an accident may result in a small, sometimes bloodless, puncture wound. However, because of its driving force, material injected into a fingertip can be deposited into the palm of the hand. Within 24 hours, there is usually a great deal of swelling, discoloration, and intense throbbing pain. Immediate treatment at a surgical emergency center is recommended.

SECTION 5 FIRE FIGHTING MEASURES

Leaks/ruptures in high pressure system using materials of this type can create a fire hazard when in the vicinity of ignition sources (eg. open flame, pilot lights, sparks, or electric arcs).

FIRE CLASSIFICATION:

OSHA Classification (29 CFR 1910.1200): Not classified by OSHA as flammable or combustible.

NFPA RATINGS: Health: 0 Flammability: 1 Reactivity: 0

FLAMMABLE PROPERTIES:

Flashpoint: (Cleveland Open Cup) 338 °F (170 °C) (Min)

Autoignition: NDA

Flammability (Explosive) Limits (% by volume in air): Lower: NA Upper: NA

EXTINGUISHING MEDIA: Use water fog, foam, dry chemical or carbon dioxide (CO2) to extinguish flames.

PROTECTION OF FIRE FIGHTERS:

Fire Fighting Instructions: This material will burn although it is not easily ignited. For fires involving this material, do not enter any enclosed or confined fire space without proper protective equipment, including self-contained breathing apparatus.
Combustion Products: Highly dependent on combustion conditions. A complex mixture of airborne solids, liquids, and gases including carbon monoxide, carbon dioxide, and unidentified organic compounds will be evolved when this material undergoes combustion.

SECTION 6 ACCIDENTAL RELEASE MEASURES

Protective Measures: Eliminate all sources of ignition in vicinity of spilled material.
Spill Management: Stop the source of the release if you can do it without risk. Contain release to prevent further contamination of soil, surface water or groundwater. Clean up spill as soon as possible, observing precautions in Exposure Controls/Personal Protection. Use appropriate techniques such as applying non-combustible absorbent materials or pumping. Where feasible and appropriate, remove contaminated soil. Place contaminated materials in disposable containers and dispose of in a manner consistent with applicable regulations.
Reporting: Report spills to local authorities and/or the U.S. Coast Guard's National Response Center at (800) 424-8802 as appropriate or required.

SECTION 7 HANDLING AND STORAGE

Precautionary Measures: DO NOT USE IN HIGH PRESSURE SYSTEMS in the vicinity of flames, sparks and hot surfaces. Use only in well ventilated areas. Keep container closed.
General Handling Information: Avoid contaminating soil or releasing this material into sewage and drainage systems and bodies of water.
Static Hazard: Electrostatic charge may accumulate and create a hazardous condition when handling this material. To minimize this hazard, bonding and grounding may be necessary but may not, by themselves, be sufficient. Review all operations which have the potential of generating an accumulation of electrostatic charge and/or a flammable atmosphere (including tank and container filling, splash filling, tank cleaning, sampling, gauging, switch loading, filtering, mixing, agitation, and vacuum truck operations) and use appropriate mitigating procedures. For more information, refer to OSHA Standard 29 CFR 1910.106, 'Flammable and Combustible Liquids', National Fire Protection Association (NFPA 77, 'Recommended Practice on Static Electricity', and/or the American Petroleum Institute (API) Recommended Practice 2003, 'Protection Against Ignitions Arising Out of Static, Lightning, and Stray Currents'.
Container Warnings: Container is not designed to contain pressure. Do not use pressure to empty container or it may rupture with explosive force. Empty containers retain product residue (solid, liquid, and/or vapor) and can be dangerous. Do not pressurize, cut, weld, braze, solder, drill, grind, or expose such containers to heat, flame, sparks, static electricity, or other sources of ignition. They may explode and cause injury or death. Empty containers should be completely drained, properly closed, and promptly returned to a drum reconditioner or disposed of properly.

SECTION 8 EXPOSURE CONTROLS/PERSONAL PROTECTION

GENERAL CONSIDERATIONS:
Consider the potential hazards of this material (see Section 3), applicable exposure limits, job activities, and other substances in the work place when designing engineering controls and selecting personal protective equipment. If engineering controls or work practices are not adequate to prevent exposure to harmful levels of this material, the personal protective equipment listed below is recommended. The user should read and understand all instructions and limitations supplied with the equipment since protection is usually provided for a limited time or under certain circumstances.

ENGINEERING CONTROLS:
Use in a well-ventilated area.

PERSONAL PROTECTIVE EQUIPMENT

Eye/Face Protection: No special eye protection is normally required. Where splashing is possible, wear safety glasses with side shields as a good safety practice.
Skin Protection: No special protective clothing is normally required. Where splashing is possible, select protective clothing depending on operations conducted, physical requirements and other substances. Suggested materials for protective gloves include: 4H (PE/EVAL), Nitrile Rubber, Silver Shield, Viton.
Respiratory Protection: No respiratory protection is normally required.
If user operations generate an oil mist, determine if airborne concentrations are below the occupational exposure limit for mineral oil mist. If not, wear an approved respirator that provides adequate protection from the measured concentrations of this material. For air-purifying respirators use a particulate cartridge.
Use a positive pressure air-supplying respirator in circumstances where air-purifying respirators may not provide adequate protection.

Occupational Exposure Limits:

Component	Limit	TWA	STEL	Ceiling	Notation
Non-hazardous additive blend in refined oil	ACGIH_TLV	5 mg/m3	10 mg/m3		
Non-hazardous additive blend in refined oil	OSHA_PEL	5 mg/m3			

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Attention: the data below are typical values and do not constitute a specification.

Appearance and Odor: Pale yellow liquid.
pH: NA
Vapor Pressure: <0.01 mmHg @ 100 °F
Vapor Density (Air = 1): >1
Boiling Point: >600 °F (>315 C)
Solubility: Soluble in hydrocarbon solvents; insoluble in water.
Freezing Point: NA
Melting Point: NA
Specific Gravity: 0.86 - 0.9 @ 15.6 °C / 15.6 °C
Viscosity: 28.8 cSt - 61.2 cSt @ 40 °C (Min)

SECTION 10 STABILITY AND REACTIVITY

Chemical Stability: This material is considered stable under normal ambient and anticipated storage and handling conditions of temperature and pressure.
Incompatibility With Other Materials: May react with strong oxidizing agents, such as chlorates, nitrates, peroxides, etc.
Hazardous Decomposition Products: None known (None expected)
Hazardous Polymerization: Hazardous polymerization will not occur.

SECTION 11 TOXICOLOGICAL INFORMATION

IMMEDIATE HEALTH EFFECTS
Eye Irritation: The eye irritation hazard is based on evaluation of data for similar materials or product components.

Skin Irritation: The skin irritation hazard is based on evaluation of data for similar materials or product components.
Skin Sensitization: No product toxicology data available.
Acute Dermal Toxicity: The acute dermal toxicity hazard is based on evaluation of data for similar materials or product components.
Acute Oral Toxicity: The acute oral toxicity hazard is based on evaluation of data for similar materials or product components.
Acute Inhalation Toxicity: The acute inhalation toxicity hazard is based on evaluation of data for similar materials or product components.

ADDITIONAL TOXICOLOGY INFORMATION:
This product contains petroleum base oils which may be refined by various processes including severe solvent extraction, severe hydrocracking, or severe hydrotreating. None of the oils requires a cancer warning under the OSHA Hazard Communication Standard (29 CFR 1910.1200). These oils have not been listed in the National Toxicology Program (NTP) Annual Report nor have they been classified by the International Agency for Research on Cancer (IARC) as; carcinogenic to humans (Group 1), probably carcinogenic to humans (Group 2A), or possibly carcinogenic to humans (Group 2B).

SECTION 12 ECOLOGICAL INFORMATION

ECOTOXICITY
The 48 hour(s) EC50 for water flea (Daphnia magna) is >1000 mg/l.
The 96 hour(s) LC50 for rainbow trout (Oncorhynchus mykiss) is >1000 mg/l.
This material is not expected to be harmful to aquatic organisms.

ENVIRONMENTAL FATE
This material is not expected to be readily biodegradable.

SECTION 13 DISPOSAL CONSIDERATIONS

Oil collection services are available for used oil recycling or disposal. Place contaminated materials in containers and dispose of in a manner consistent with applicable regulations. Contact your sales representative or local environmental or health authorities for approved disposal or recycling methods.

SECTION 14 TRANSPORT INFORMATION

The description shown may not apply to all shipping situations. Consult 49CFR, or appropriate Dangerous Goods Regulations, for additional description requirements (e.g., technical name) and mode-specific or quantity-specific shipping requirements.

DOT Shipping Name: NOT REGULATED AS A HAZARDOUS MATERIAL FOR TRANSPORTATION UNDER 49 CFR
DOT Hazard Class: NOT APPLICABLE
DOT Identification Number: NOT APPLICABLE
DOT Packing Group: NOT APPLICABLE
Additional Information: NOT HAZARDOUS BY U.S. DOT. ADR/RID HAZARD CLASS NOT APPLICABLE.

SECTION 15 REGULATORY INFORMATION

SARA 311/312 CATEGORIES:
1. Immediate (Acute) Health Effects: NO
2. Delayed (Chronic) Health Effects: NO
3. Fire Hazard: NO
4. Sudden Release of Pressure Hazard: NO

5. Reactivity Hazard: NO

REGULATORY LISTS SEARCHED:

4_I1=IARC Group 1	15=SARA Section 313
4_I2A=IARC Group 2A	16=CA Proposition 65
4_I2B=IARC Group 2B	17=MA RTK
05=NTP Carcinogen	18=NJ RTK
06=OSHA Carcinogen	19=DOT Marine Pollutant
09=TSCA 12(b)	20=PA RTK

CHEMICAL INVENTORIES:
CANADA: All the components of this material are on the Canadian DSL or have been notified under the New Substance Notification Regulations, but have not yet been published in the Canada Gazette.
EUROPEAN UNION: All the components of this material are in compliance with the EU Seventh Amendment Directive 92/32/EEC.
JAPAN: All the components of this product are on the Existing & New Chemical Substances (ENCS) inventory in Japan, or have an exemption from listing.
KOREA: All the components of this product are on the Existing Chemicals List (ECL) in Korea.
PHILIPPINES: All the components of this product are listed on the Philippine Inventory of Chemicals and Chemical Substances (PICCS).
UNITED STATES: All of the components of this material are on the Toxic Substances Control Act (TSCA) Chemical Inventory.

NEW JERSEY RTK CLASSIFICATION:
Under the New Jersey Right-to-Know Act L. 1983 Chapter 315 N.J.S.A. 34:5A-1 et. seq., the product is to be identified as follows:
PETROLEUM OIL (Hydraulic oil)
WHMIS CLASSIFICATION:
This product is not considered a controlled product according to the criteria of the Canadian Controlled Products Regulations.

SECTION 16 OTHER INFORMATION

NFPA RATINGS: Health: 0 Flammability: 1 Reactivity: 0
HMIS RATINGS: Health: 1 Flammability: 1 Reactivity: 0

(0-Least, 1-Slight, 2-Moderate, 3-High, 4-Extreme, PPE:- Personal Protection Equipment Index recommendation, *- Chronic Effect Indicator). These values are obtained using the guidelines or published evaluations prepared by the National Fire Protection Association (NFPA) or the National Paint and Coating Association (for HMIS ratings).

REVISION STATEMENT: Changes have been made throughout this Material Safety Data Sheet. Please read the entire document.

ABBREVIATIONS THAT MAY HAVE BEEN USED IN THIS DOCUMENT:

TLV	-	Threshold Limit Value	TWA	-	Time Weighted Average
STEL	-	Short-term Exposure Limit	PEL	-	Permissible Exposure Limit
			CAS	-	Chemical Abstract Service Number
NDA	-	No Data Available	NA	-	Not Applicable
<=	-	Less Than or Equal To	>=	-	Greater Than or Equal To

Prepared according to the OSHA Hazard Communication Standard (29 CFR 1910.1200) and the ANSI MSDS Standard (Z400.1).

The above information is based on the data of which we are aware and is believed to be correct as of the date hereof. Since this information may be applied under conditions beyond our control and with which we may be unfamiliar and since data made available subsequent to the date hereof may suggest modifications of the information, we do not assume any responsibility for the results of its use. This information is furnished upon condition that the person receiving it shall make his own determination of the suitability of the material for his particular purpose.

Material Safety Data Sheet

Prepared According to the OSHA Hazard Communication Standard (29 CFR 1910.1200). (Formerly Called MATERIAL INFORMATION BULLETIN)

CHEVRON DELO 200 Motor Oil SAE 30 100

CPS 222503

TYPICAL COMPOSITION

Highly refined base oils (CAS 64742-36-5, 64742-65-0, 64742-57-0, 64742-01-4, 64742-54-7)	>90%
Additives including inhibitors, dispersant, calcium phenate and zinc dialkyldithiophosphate (CAS 68649-42-3)	<10%

EXPOSURE STANDARD

No Federal OSHA exposure standard or ACGIH TLV has been established for this material. Based on information reviewed to date, we recommend an exposure standard of 5 mg/m^3. This is the Federal OSHA exposure standard and the ACGIH (1984-85) TLV for mineral oil mists.

PHYSIOLOGICAL & HEALTH EFFECTS

EMERGENCY & FIRST AID PROCEDURES

Eyes

Expected to cause no more than minor eye irritation.

Flush eyes immediately with fresh water for at least 15 minutes while holding the eyelids open. If irritation persists, see a doctor.

Skin

Expected to cause no more than minor skin irritation following prolonged or frequently repeated contact. See Additional Health Data.

Wash skin thoroughly with soap and water. Launder contaminated clothing.

Inhalation

Not expected to be acutely toxic by inhalation. Breathing mineral oil mist at concentrations in air that exceed the recommended exposure standard can cause respiratory irritation or discomfort. See Additional Health Data.

If respiratory discomfort or irritation occurs, move the person to fresh air. See a doctor if discomfort or irritation continues.

Ingestion

Not expected to be acutely toxic by ingestion.

If swallowed, give water or milk to drink and telephone for medical advice. Consult medical personnel before inducing vomiting. If medical advice cannot be obtained, then take the person and product container to the nearest medical emergency treatment center or hospital.

ADDITIONAL HEALTH DATA

See Page 3.

SPECIAL PROTECTIVE INFORMATION

Eye Protection: No special eye protection is necessary.
Skin Protection: No special skin protection is necessary.
Respiratory Protection: No special respiratory protection is normally required. However, if operating conditions create airborne concentrations which exceed the recommended exposure standard, the use of an approved respirator is recommended.
Ventilation: Use adequate ventilation to keep the airborne concentrations of this material below the recommended exposure standard.

FIRE PROTECTION

Flash Point: (COC)428°F(220°C)
Autoignition Temp.: NDA
Flammability Limits: n/a
Extinguishing Media: CO_2, Dry Chemical, Foam, Water Fog.
Special Fire Fighting Procedures: For fires involving this material, do not enter any enclosed or confined fire space without proper protective equipment, including self-contained breathing apparatus. See Hazardous Decomposition Products. Read the entire MSDS.

SPECIAL PRECAUTIONS

DO NOT weld, heat or drill container. Residue may ignite with explosive violence if heated sufficiently.

CAUTION! Do not use pressure to empty drum or explosion may result.

ENVIRONMENTAL PROTECTION

Environmental Impact: This material is not expected to present any environmental problems other than those associated with oil spills.
Precautions if Material is Released or Spilled: Stop the source of the leak or release. Clean up releases as soon as possible. Contain liquid to prevent further contamination of soil, surface water or groundwater. Clean up small spills using appropriate techniques such as sorbent materials or pumping. Where feasible and appropriate, remove contaminated soil. Follow prescribed procedures for reporting and responding to larger releases.
Waste Disposal Methods: Place contaminated materials in disposable containers and dispose of in a manner consistent with applicable regulations. Contact local environmental or health authorities for approved disposal of this material.

REACTIVITY DATA

Stability (Thermal, Light, etc.): Stable.
Incompatibility (Materials to Avoid): May react with strong oxidizing materials.
Hazardous Decomposition Products: Normal combustion forms carbon dioxide and water vapor and may produce oxides of sulfur, nitrogen and phosphorus; incomplete combustion can produce carbon monoxide.
Hazardous Polymerization: Will not occur.

PHYSICAL PROPERTIES

Solubility: Insoluble in water. Miscible with hydrocarbon solvents.
Appearance (Color, Odor, etc.): Dark amber liquid.
Boiling Point: n/a
Melting Point: n/a
Specific Gravity: 0.88 @ 15.6/15.6°C
Vapor Pressure: n/a
Vapor Density (Air=1): n/a
Percent Volatile (Volume %): n/a
Evaporation: n/a
Pour Point: -18°C (-0.4°F) Max.
Viscosity: 12 cSt @ 100°C

n/a = Not Applicable
NDA = No Data Available

Material Safety Data Sheet

CHEVRON DELO 200 Motor Oil SAE 30 CPS 222503

ADDITIONAL HEALTH DATA

Signs and symptoms of respiratory tract irritation may include, but may not be limited to, one or more of the following, depending on concentration and length of exposure: nasal discharge, nosebleed, sore throat, coughing, bronchitis, pulmonary edema and difficulty in breathing.

This product contains zinc dialkyldithiophosphate (ZDDP). ZDDPs have been tested by repeated application to the skin of young rabbits for three weeks. These rabbits developed severe skin damage, weight loss, and adverse testicular effects. Follow-up studies indicated similar testicular effects can be produced by placing rabbits on a restricted diet and causing them to lose weight or by treating rabbits with simple caustic chemicals and causing them to develop both severe skin irritation and weight loss. Rats similarly treated with ZDDP did not develop testicular effects even when skin damage and weight loss occurred. These results indicate that the testicular effects seen in rabbits were not caused by the toxicity of ZDDPs but were due to the species reaction to stress from severe skin irritation and weight loss. There is no evidence that human exposure to ZDDPs in the workplace will cause testicular effects since occupational exposure does not cause stress from severe skin irritation and weight loss similar to that observed in rabbits. In summary, we now believe there is no risk of male reproductive impairment from working with ZDDP.

Several ZDDPs have also been found to have weak mutagenic activity in cultured mammalian cells. The low level of activity occurred only at ZDDP concentrations which were highly toxic to the test cells. Since mutagenic activity was observed with zinc chloride but not with calcium dialkyldithiophosphate, the weak mutagenic activity of ZDDP may be due to the zinc in the chemical. Zinc is abundant in the environment, is an essential element in our diets, and it is generally accepted that zinc is not a health hazard. Therefore, we do not believe the test results discussed above indicate a genetic hazard to employees working with ZDDPs. Appropriate personal hygiene procedures as outlined in the MSDS, should, of course, be followed since ZDDPs in concentrated form are irritating to the skin.

This product also contains calcium phenate. When a similar calcium phenate was applied to the skin of rabbits five days/week for four weeks, the animals developed adverse testicular effects. Studies with other chemicals have since shown that rabbits may develop similar testicular effects due to stress rather than to chemical toxicity. We further investigated the effects of calcium phenates in rats, a species now recognized as more appropriate than rabbits for investigating toxicity by repeated skin exposures. Calcium phenate applied five days/week for four weeks to the skin of rats did not produce adverse testicular effects. Based on these data, we believe that there is no risk of male reproductive impairment from exposure to calcium phenate in the workplace.

This product contains base oils which the International Agency for Research on Cancer (IARC) classifies as having no evidence of carcinogenic potential.

During use in engines, contamination of oil with low levels of cancer-causing combustion products occurs. Used motor oils have been shown to cause skin cancer in mice following repeated application and continuous exposure. Brief or intermittent skin contact with used motor oil is not expected to have serious effects in humans if the oil is thoroughly

removed by washing with soap and water. See Chevron Material Safety Data Sheet No. 1793 for additional information on used motor oil.

Material Safety Data Sheet **Bradley OptiAid/OptiAid Plus (Black Label)**	Page 1 of 5 Pub. Date 12/12/00

Bradley Fixtures Corporation
W142 N9101 Fountain Boulevard
Menomonee Falls, Wisconsin 53052 USA

Telephone Number: 262-251-6000
Emergency Phone Number: 262-251-6000

SECTION #1 – PRODUCT IDENTIFICATION

Product: Bradley OptiAid/OptiAid Plus (Black Label)

Chemical Family: Eyewash solution

This MSDS is being provided to your company for the purpose of providing current health and safety information to your management and for your employees who work with this product. Please read the information on these sheets before attempting to use the product. You must also provide this information to those people in your company whose responsibility it is to comply with Federal, State, and/or Provincial "Right to Know" regulations. Also make sure that this information is available and disseminated to your employees before their use of the product. This information should be kept on file and made available to any employee who requests it. It is your obligation to comply with safety and health regulations pertinent to your jurisdiction.

SECTION #2 – COMPOSITION/INFORMATION ON INGREDIENTS

Component: Boric acid
CASRN 10043-35-3
No OSHA PEL(s) or ACGIH TLV(s)

Component: Sodium borate decahydrate
CASRN 1303-96-4
No OSHA PEL(s); ACGIH TLV: 5 mg/m^3 TWA

SECTION #3 – HAZARDS IDENTIFICATION

Primary Route(s) of Entry

Ingestion.

Eye Hazards

Eye contact with this product is not known to be hazardous.

Skin Hazards

Skin contact with the product is not known to be hazardous.

Ingestion Hazards

Ingestion of large quantities of the product may cause gastric irritation. Long-term ingestion of boric acid or borates may cause *borism*, a disease characterized by dry skin and gastrointestinal disturbances.

Inhalation Hazards

If this product is used in a manner that produces a mist, inhalation of the mist may irritate the nose, throat, and upper respiratory tract.

SECTION #4 – FIRST AID MEASURES

Ingestion

Do not induce vomiting. Give the subject large quantities of water or other liquids. Contact a physician or Poison Control Center. If the subject is unconscious or convulsive, seek immediate medical assistance. Do not attempt to give liquids to an unconscious person.

Eyes

None applicable.

Skin

None applicable. If clothing becomes wetted with product, replace with dry clothing.

Inhalation

If signs and symptoms of irritation occur, remove subject from the area. Seek medical attention if necessary.

Note to Physician

The components boric acid and sodium borate decahydrate ("Borax") are potentially toxic. The combined concentration of boric acid/borates in the product is ≤25 grams/liter.

SECTION #5 – FIRE FIGHTING MEASURES

Fire and Explosion Hazards

This product is non-flammable and non-explosive. If the product is evaporated to dryness, thermal decomposition of the non-aqueous ingredients may emit carbon monoxide, smoke, and/or irritant gases.

Extinguishing Media

Not applicable (non-flammable mixture)

SECTION #6 – ACCIDENTAL RELEASE MEASURES

Small Spills

Soak up spilled product with absorbent media (e.g., paper towels). Dispose of residues in accordance with applicable Federal, State/Provincial, and local regulations.

Large Spills

Enclose or isolate spillage area to control its spread. Transfer spilled material to an impervious container. Dispose of residues in accordance with applicable Federal, State/Provincial, and local regulations. Do not flush large quantities of product into sanitary sewers. If product is accidentally flushed into a sanitary sewer system, flush contaminated areas with large quantities of water and notify the appropriate authority

SECTION #7 – HANDLING AND STORAGE

Handling Precautions

No special handling precautions are required.

Storage Precautions

Store in a cool place away from incompatible materials (see Section #10).

Work/Hygienic Practices

To minimize the possibility of ingestion, wash hands and face before eating, drinking, applying cosmetics, or using tobacco.

SECTION #8 – EXPOSURE CONTROLS/PERSONAL PROTECTION

Engineering Controls

Mechanical ventilation is not required under normal conditions of use. If the product is used in a manner that generates airborne mist, provide appropriate ventilation (dilution, local exhaust) adequate to control mist concentrations in air.

Eye/Face Protection

Eye protection is not required.

Skin Protection

Skin protection is not required.

Respiratory Protection

Respiratory protection is not required under normal conditions of use. If the product is used in a manner that generates airborne mist not controlled by ventilation, wear a NIOSH-approved dust/mist respirator (rated N95 or better) to minimize nose, throat, and respiratory tract irritation.

SECTION #9 – PHYSICAL AND CHEMICAL PROPERTIES

Percent Volatiles: not applicable
Boiling: >212° F./100° C.
Specific Gravity: *ca.* 1.00
Evaporation Rate: not applicable
Vapor pressure: not applicable
Vapor density: not applicable
Solubility (water): complete
Appearance: Water-white liquid

SECTION #10 – STABILITY AND REACTIVITY

Stability: stable

Hazardous Polymerization: will not occur

Incompatible Materials: strong oxidizing or reducing agents; acetic anhydride

SECTION #10 – STABILITY AND REACTIVITY Continued...

Hazardous Decomposition Byproducts

If the product is evaporated to dryness, thermal decomposition of the non-aqueous ingredients may emit carbon monoxide, smoke, and/or irritant gases.

SECTION #11 – TOXICOLOGICAL INFORMATION

Toxicological Information

This product has not been subject to toxicological testing by the manufacturer.

Carcinogenicity

None of the components of this product are classified as potential or demonstrated human carcinogens by IARC, NTP, or OSHA.

SECTION #12 – ECOLOGICAL INFORMATION

No data available

SECTION #13 – DISPOSAL CONSIDERATIONS

Waste Disposal Methods

Dispose of product in accordance with applicable Federal, State/Provincial, and local regulations.

SECTION #14 – TRANSPORT INFORMATION

This product is not a *Hazardous Substance* or *Dangerous Goods* according to USDOT, TDG (Canada), ICAO, or IMO regulations.

SECTION #15 – REGULATORY INFORMATION

SARA Title III Notifications and Information

SARA Title III - Hazard Class(es): Acute Health Hazard; Chronic Health Hazard

SARA Title III - Section 313 Supplier Notification: This product contains no chemicals subject to the reporting requirements of Section 313 of the Emergency Planning and Community Right-To-Know Act (EPCRA) of 1986 and of 40 CFR 372.

***Controlled Products Regulations* (Canada) Information**

Components Toxicology Data

Component (CASRN)	LD_{50} (Route/Species)	LC_{50} (Route/Species)
Boric acid (10043-35-3)	2660 mg/kg (oral/rat)	No data available
Sodium borate decahydrate (1303-96-4)	2660 mg/kg (oral/rat)	No data available

WHMIS Hazard Classification(s) of product: none applicable
Components on *Ingredients Disclosure List*: Boric acid (CASRN 10043-35-3)

SECTION #16 – REVISION INFORMATION

Date of previous version: 16 June 1999

Reason(s) for revision: Updating and conversion to 16-section format

DISCLAIMER OF EXPRESS AND IMPLIED WARRANTIES

We believe that the information contained herein is current as of the date of the Material Safety Data Sheet. Since the use of this product is not within the use of Bradley Fixtures Corporation, it is the user's obligation to determine the conditions of safe use of the product. Additionally, as data, standards, and regulations change, and conditions of use and handling are beyond our control, NO WARRANTIES, EXPRESSED OR IMPLIED, ARE MADE AS TO THE COMPLETENESS OR CONTINUING ACCURACY OF THIS INFORMATION. The user should review any recommendations in the specific context of the intended use to determine whether or not they are appropriate.

ASHLAND PETROLEUM DIV OF ASHLAND OIL -- FUEL OIL NO.1 DIESEL FUEL - DIESEL FUEL
MATERIAL SAFETY DATA SHEET
FSC: 9140
NIIN: 000000185
Manufacturer's CAGE: 9V291
Part No. Indicator: B
Part Number/Trade Name: FUEL OIL NO.1 DIESEL FUEL

General Information

Item Name: DIESEL FUEL
Company's Name: ASHLAND PETROLEUM CO DIV OF ASHLAND OIL INC
Company's Street: 1409 WINCHESTER AVE
Company's P. O. Box: 391
Company's City: ASHLAND
Company's State: KY
Company's Country: US
Company's Zip Code: 41114
Company's Emerg Ph #: 606-329-3333 800-274-5263
Company's Info Ph #: 606-329-3333 / FAX 606-329-3230
Distributor/Vendor # 1: LEEMON OIL INC (313-272-6700)
Distributor/Vendor # 1 Cage: 3R586
Record No. For Safety Entry: 015
Tot Safety Entries This Stk#: 015
Status: SE
Date MSDS Prepared: 07OCT93
Safety Data Review Date: 14NOV94
Supply Item Manager: CD
MSDS Preparer's Name: MSDS # 0285437-001.000
MSDS Serial Number: BVPXN
Specification Number: VV-F-800
Spec Type, Grade, Class: DF-1 GRADE
Hazard Characteristic Code: F4
Unit Of Issue: GL
Unit Of Issue Container Qty: UNKNOWN
Type Of Container: UNKNOWN
Net Unit Weight: UNKNOWN

Ingredients/Identity Information

Proprietary: NO
Ingredient: ALIPHATIC PETROLEUM SOLVENT
Ingredient Sequence Number: 01
Percent: 100
NIOSH (RTECS) Number: OA5500000
CAS Number: 8008-20-6
OSHA PEL: NOT ESTABLISHED
ACGIH TLV: NOT ESTABLISHED
Other Recommended Limit: NONE RECOMMENDED

Physical/Chemical Characteristics

Appearance And Odor: LIQUID;CLEAR TO FLUORESCENT GREEN;TYPICAL ODOR
Boiling Point: 260-360F
Vapor Pressure (MM Hg/70 F): <1
Vapor Density (Air=1): 4.5
Specific Gravity: .77-.83
Decomposition Temperature: UNKNOWN
Evaporation Rate And Ref: <1 ETHER=1
Solubility In Water: NEGLIGIBLE
Corrosion Rate (IPY): UNKNOWN

Fire and Explosion Hazard Data

Flash Point: 115F,46C
Extinguishing Media: REGULAR FOAM,CARBON DIOXIDE,DRY CHEMICAL.
Special Fire Fighting Proc: USE A SELF-CONTAINED BREATHING APPARATUS AND FULL PROTECTIVE EQUIPMENT.COOL FIRE EXPOSED CONTAINERS WITH WATER FOG.
Unusual Fire And Expl Hazrds: COMBUSTIBLE LIQUID.FIRE CONDITIONS MAY EVOLVE TOXIC FUMES.WATER OR FOAM MAY CAUSE DANGEROUS FROTHING.VAPOR TRAVEL ALONG THE GROUND AND CAN FLASHBACK.

Reactivity Data

Stability: YES
Cond To Avoid (Stability): HIGH HEAT, OPEN FLAMES AND OTHER SOURCES OF IGNITION
Materials To Avoid: STRONG OXIDIZING AGENTS.
Hazardous Decomp Products: CARBON DIOXIDE,CARBON MONOXIDE AND UNIDENTIFIED HYDROCARBONS.
Hazardous Poly Occur: NO

Health Hazard Data

LD50-LC50 Mixture: ORAL LD50 (RAT) IS >5MG/KG(SIMILAR PROD)
Route Of Entry - Inhalation: YES
Route Of Entry - Skin: YES
Route Of Entry - Ingestion: NO
Health Haz Acute And Chronic: EYES:MAY CAUSE SEVERE IRRITATION.SKIN:MAY CAUSE MODERATE IRRITATION AND DEFATTING.INGEST:MAY CAUSE GI TRACT IRRITATION.MAY CAUSE LUNG DAMAGE IF VOMITED AFTER INGESTING.INHAL:MAY CAUSE RESPIRATORY IRRITATION AND CNS DEPRESSION.
Carcinogenicity - NTP: NO
Carcinogenicity - IARC: NO
Carcinogenicity - OSHA: NO
Explanation Carcinogenicity: MIDDLE DISTILLATE CAN PRODUCE SKIN CANCER. WHOLE DIESEL EXHAUST IS A POTENTIAL CARCINOGEN.
DERMATITIS.INHAL:DIZZINESS,HEADACHE,NAUSEA,HEADACHE,FATIGUE,POSSIBLE UNCONSCIOUSNESS AND ASPHYXIATION.
Med Cond Aggravated By Exp: PERSONS WITH PRE-EXISTING SKIN AILMENTS MAY BE AT INCREASED RISK FROM EXPOSURE.
Emergency/First Aid Proc: SKIN:REMOVE CONTAMINATED CLOTHING;WASH WITH SOAP AND WATER.EYES:FLUSH WITH WATER FOR 15 MINUTES.INHAL:REMOVE TO FRESH AIR.GIVE OXYGEN OR ARTIFICIAL RESPIRATION IF NEEDED.INGEST:DO NOT INDUCE VOMITING.GET PROMPT QUALIFIED MEDICAL ATTENTION.

Precautions for Safe Handling and Use

Steps If Matl Released/Spill: ELIMINATE SOURCES OF IGNITION.USE PROPER RESPIRATORY AND PROTECTIVE EQUIPMENT.SHUT OFF LEAK IF SAFE.DIKE.SOAK UP WITH A NON-COMBUSTIBLE INERT ABSORBANT(CLAY,SAND);PLACE IN PROPER CONTAINER FOR DISPOSAL.AVOID DISCHARGE TO SEWER.
Neutralizing Agent: NONE
Waste Disposal Method: DISPOSE OF IN ACCORDANCE WITH FEDERAL,STATE AND LOCAL REGULATIONS.
Precautions-Handling/Storing: STORE IN A COOL,DRY,WELL-VENTILATED AREA FOR COMBUSTIBLE MATERIALS.KEEP CONTAINER CLOSED WHEN NOT IN USE.AVOID HEAT AND SOURCES OF IGNITION.
Other Precautions: EMPTY CONTAINERS MAY CONTAIN HAZARDOUS RESIDUE;DISPOSE OF PROPERLY.GROUND CONTAINERS WHEN TRANSFERRING LIQUIDS;FLOWING HYDROCARBONS CAN BECOME ELECTROSTATICALLY CHARGED.

Control Measures

Respiratory Protection: WHERE ENVIRONMENTAL CONTROLS ARE LACKING OR IN ENCLOSED SPACES USE EITHER A SELF-CONTAINED BREATHING APPARATUS OR A NOISH/MSHA APPROVED RESPIRATOR FOR ORGANIC VAPORS,DEPENDING ON THE AIRBORN

CONCENTRATION.
Ventilation: LOCAL VENTILATION AT THE WORKSITE;MECHANICAL(GENERAL) VENTILATION TO MAINTAIN TLV/PEL.
Protective Gloves: IMPERVIOUS
Eye Protection: CHEMICAL SPLASH GOGGLES
Other Protective Equipment: PROTECTIVE CLOTHING,AS NEEDED.PROVIDE A LOCAL EYE WASH STATION AND SAFETY SHOWER.
Work Hygienic Practices: WASH HANDS.SEPERATE WORK CLOTHES FROM STREET CLOTHES.LAUNDER WORK CLOTHES BEFORE REUSE.KEEP FOOD OUT OF THE WORK AREA.
Suppl. Safety & Health Data: NONE

Transportation Data

Trans Data Review Date: 94318
DOT PSN Code: EXF
DOT Symbol: D
DOT Proper Shipping Name: DIESEL FUEL
DOT Class: 3
DOT ID Number: NA1993
DOT Pack Group: III
DOT Label: NONE
IMO PSN Code: HIA
IMO Proper Shipping Name: FLAMMABLE LIQUID, N.O.S. *
IMO Regulations Page Number: 3345
IMO UN Number: 1993
IMO UN Class: 3.3
IATA PSN Code: MCA
IATA UN ID Number: 1993
IATA Proper Shipping Name: FLAMMABLE LIQUID, N.O.S. * *
IATA UN Class: 3
IATA Label: FLAMMABLE LIQUID
AFI PSN Code: JEV
AFI Symbols: D
AFI Prop. Shipping Name: DIESEL FUEL
AFI Class: 3
AFI ID Number: NA1993
AFI Pack Group: III
AFI Label: NONE
AFI Basic Pac Ref: 7-7
MMAC Code: NR
N.O.S. Shipping Name: DIESEL FUEL NO.1
Additional Trans Data: NONE

Disposal Data

Label Data

Label Required: YES
Technical Review Date: 14NOV94
MFR Label Number: UNKNOWN
Label Status: F
Common Name: FUEL OIL NO.1 DIESEL FUEL
Signal Word: WARNING!
Acute Health Hazard-Slight: X
Contact Hazard-Slight: X
Fire Hazard-Moderate: X
Reactivity Hazard-None: X
Special Hazard Precautions: EYES:MAY CAUSE SEVERE IRRITATION.SKIN:MAY CAUSE MODERATE IRRITATION AND DEFATTING.INGEST:MAY CAUSE GI TRACT IRRITATION.MAY CAUSE LUNG DAMAGE IF VOMITED AFTER INGESTING.INHAL:MAY CAUSE RESPIRATORY IRRITATION AND CNS DEPRESSION. STORE IN A COOL,DRY,WELL-VENTILATED AREA FOR COMBUSTIBLE MATERIALS.KEEP CONTAINER CLOSED WHEN NOT IN USE.AVOID HEAT AND SOURCES OF IGNITION. FIRST AID: SKIN:REMOVE CONTAMINATED

CLOTHING;WASH WITH SOAP A WATER.EYES:FLUSH WITH WATER FOR 15 MINUTES.
INHAL:REMOVE TO FRESH AIR.GIVE OXYGEN OR ARTIFICIAL RESPIRATION IF NEEDED.
INGEST:DO NOT INDUCE VOMITING.GET PROMPT QUALIFIED MEDICAL ATTENTION.
Protect Eye: Y
Protect Skin: Y
Label Name: ASHLAND PETROLEUM CO DIV OF ASHLAND OIL INC
Label Street: 1409 WINCHESTER AVE
Label P.O. Box: 391
Label City: ASHLAND
Label State: KY
Label Zip Code: 41114
Label Country: US
Label Emergency Number: 606-329-3333 800-274-5263
==========
URL for this msds http://hazard.com. If you wish to change, add to, or delete information in this archive please sent updates to dan@hazard.com.

Ashland Petroleum Company
Division of Ashland, Inc.
P.O. Box 391, Ashland, Kentucky 41101
(606) 329-3333

This MSDS complies with 29 CFR 1910.1200 (The Hazard Communication Standard)

24-Hour Emergency Telephone: 1-800-ASHLAND or 1-800-274-5263

****

Product Name: UNLEADED GASOLINE (ALL GRADES)

MSDS NO: 0027354-010.000

PRINT DATE: 02/24/97

MATERIAL SAFETY DATA SHEET
MSDS Id: 37154

INDEX:

Attention:The information accumulated herein is believed to be accurate but is not warranted to be whether originating with the company or not. Recipients are advised to confirm in advance of need that the information is current, applicable and suitable to their circumstances. The MSDS has been prepared in accordance with OSHA's Hazard Communication Standard 29 CFR 1910.1200. The information relates specifically to the product designated and may not be valid when the material is used in combination with other materials or products or in a particular process.

Note: N.A. indicates the information is not available.

Ashland Petroleum Company MSDS are available through CHEMTREC 1-800-424-9300

SECTION 1 - IDENTIFICATION

PRODUCT AND COMPANY IDENTIFICATION: HYDROCARBON MIXTURE

Material Number: 0027354-010.000
Date Of MSDS: 21-AUG-96
Manufacturer: ASHLAND PETROLEUM COMPANY
Address: P.O. BOX 391
ASHLAND, KY 41114

Emergency Telephone: (800)274-5263
Information Telephone: (606)329-3333

Known Synonyms

UNLEADED GASOLINE,CONVENTIONAL GASOLINE, RBOB, REFORMULATED GASOLINE (ALL GRADES)

SECTION 2 - INGREDIENTS INFORMATION

Ingredients	C.A.S No	Concentration	Agency	Limit	Category
NOTE: GASOLINE IS A MIXTURE OF HYDROCARBONS BLENDED TO MEET VARIOUS SPECIFICATIONS. THE APPROPRIATE CAS NUMBER FOR REFINED GASOLINE IS 86290-81-5. THE REFINERY STREAMS USED TO BLEND GASOLINE ARE ALL ON THE TOXIC SUBSTANCES CONTROL ACT(TSCA) INVENTORY. THE SPECIFICATIONS FOR GASOLINES VARY WITH STATE AND LOCAL REGULATIONS. ETHANOL AND MTBE ARE ADDED INTENTIONALLY IN CERTAIN DISTRIBUTION AREAS. ALL OTHER COMPONENTS LISTED BELOW ARE INHERENT IN THE REFINERY STREAMS.					
GASOLINE-INCLUDES COMPOUNDS LISTED BELOW	86290815	100 Wt%	ACGIH	300 PPM	TLV,8HR
			ACGIH	500 PPM	STEL,15MIN
			OSHA	300 PPM	PEL,8HR (1989)
			OSHA	500 PPM	STEL,15MIN (1989)
METHYL TERT-BUTYL ETHER	1634044	0-17 Wt%	ACGIH	40 PPM	TLV,8HR
			AIHA	100 PPM	WEEL,8HR
ETHYL ALCOHOL (ETHANOL)	64175	0-10 Wt%	ACGIH	1000 PPM	TLV,8HR
			NIOSH	1000 PPM	TWA,10HR
			NIOSH	15000 PPM	IDLH-1990
			NIOSH	3300 PPM	IDLH-1994
			OSHA	1000 PPM	PEL,8HR (1971 & 1989)
ISOPENTANE	78784	0-10 Wt%	N.A.	N.A.	N.A.
N-BUTANE	106978	0-11 Wt%	ACGIH	800 PPM	TLV
			NIOSH	800 PPM	TWA,10HR
			OSHA	800 PPM	PEL,8HR (1989)
TOLUENE	108883	3-10 Wt%	ACGIH	50 PPM	TLV,8HR (SKIN)
			NIOSH	100 PPM	REL,10HR
			NIOSH	150 PPM	STEL,15MIN
			NIOSH	2000 PPM	IDLH-1990
			NIOSH	500 PPM	IDLH-1994
			OSHA	100 PPM	PEL,8HR (1989)
			OSHA	150 PPM	STEL,15MIN (1989)
			OSHA	200 PPM	PEL,8HR

					(1971)
			OSHA	300 PPM	CEIL-1971
			OSHA	500 PPM	PEAK-1971 (10MIN/8HR)
XYLENE	1330207	4-10 Wt%	ACGIH	100 PPM	TLV,8HR
			ACGIH	150 PPM	STEL,15MIN
			NIOSH	100 PPM	TWA,8HR
			NIOSH	150 PPM	STEL
			NIOSH	1000 PPM	IDLH-1990
			NIOSH	900 PPM	IDLH-1994
			OSHA	100 PPM	PEL, 8HR (1971 & 1989)
			OSHA	150 PPM	STEL,15MIN (1989)
BENZENE	71432	0-5 Wt%	ACGIH	10 PPM	TLV,8HR
			NIOSH	0.1 PPM	TWA,8HR
			NIOSH	1 PPM	STEL,15MIN
			NIOSH	3000 PPM	IDLH-1990
			NIOSH	500 PPM	IDLH-1994
			OSHA	1 PPM	PEL
			OSHA	5 PPM	STEL
METHYL-2-PENTANE	107835	0-5 Wt%	N.A.	N.A.	N.A.
METHYL-3-PENTANE	96140	0-5 Wt%	N.A.	N.A.	N.A.
NORMAL PENTANE	109660	0-5 Wt%	ACGIH	600 PPM	TLV,8HR
			ACGIH	750 PPM	STEL,15MIN
			NIOSH	610 PPM	CEIL,15MIN
			NIOSH	120 PPM	TWA,10HR
			NIOSH	1500 PPM	IDLH-1994
			NIOSH	15000 PPM	IDLH-1990
			OSHA	1000 PPM	PEL,8HR (1971)
			OSHA	600 PPM	PEL,8HR (1989)
			OSHA	750 PPM	STEL,15MIN (1989)
1,2,4-TRIMETHYLBENZENE	95636	0-4 Wt%	N.A.	N.A.	N.A.
HEXANE	110543	0-5 Wt%	ACGIH	50 PPM	TLV,8HR
			NIOSH	50 PPM	TWA,10HR
			NIOSH	1100 PPM	IDLH-1994
			NIOSH	5000 PPM	IDLH-1990
			OSHA	50 PPM	PEL,8HR (1989)
			OSHA	500 PPM	PEL,8HR (1971)
2-METHYLHEXANE	591764	0-3 Wt%	N.A.	N.A.	N.A.
3-METHYLHEXANE	589344	0-3 Wt%	N.A.	N.A.	N.A.
DIMETHYL-2,3-BUTANE	79298	0-2 Wt%	N.A.	N.A.	N.A.
ETHYLBENZENE	100414	0-3 Wt%	ACGIH	100 PPM	TLV,8HR
			ACGIH	125 PPM	STEL,15MIN
			NIOSH	100 PPM	TWA,10HR
			NIOSH	125 PPM	STEL,15MIN

			NIOSH	2[illegible] PPM	IDLH-1990
			NIOSH	800 PPM	IDLH-1994
			OSHA	100 PPM	PEL,8HR (1971 &1989)
			OSHA	125 PPM	STEL,15MIN (1989)
HEPTANE	142825	0-3 Wt%	ACGIH	400 PPM	TLV,8HR
			ACGIH	500 PPM	STEL,15MIN
			NIOSH	85 PPM	TWA, 10HR
			NIOSH	5000 PPM	IDLH-1990
			NIOSH	750 PPM	IDLH-1994
			OSHA	400 PPM	PEL,8HR (1989)
			OSHA	500 PPM	PEL,8HR (1971)
			OSHA	500 PPM	STEL,15MIN-1989

For information regarding Carcinogenic Status please see Section 15

SECTION 3 - HAZARDS IDENTIFICATION

EMERGENCY OVERVIEW:
EXTREMELY FLAMMABLE LIQUID AND VAPOR. VAPOR MAY CAUSE FLASH FIRE. GASOLINES ACT GENERALLY AS AN ANESTHETIC AND ARE MUCOUS MEMBRANE IRRITANTS. INHALATION IS THE MOST COMMON ROUTE OF EXPOSURE. HEADACHES, BLURRED VISION, DIZZINESS, AND NAUSEA ARE THE MOST COMMON SYMPTOMS OF EXCESSIVE EXPOSURE TO VAPORS. GASOLINE IS HARMFUL OR FATAL IF SWALLOWED AND ALSO CAN BE AN ASPIRATION HAZARD IF SWALLOWED. LONG-TERM EXPOSURE TO VAPOR HAS CAUSED CANCER IN LABORATORY ANIMALS.

ACUTE EXPOSURE INFORMATION:

EYE CONTACT:
EXPOSURE CAUSES EYE IRRITATION. SYMPTOMS MAY INCLUDE STINGING, TEARING, REDNESS, AND SWELLING.

SKIN CONTACT:
EXPOSURE MAY CAUSE MILD SKIN IRRITATION. PROLONGED OR REPEATED EXPOSURE MAY DRY THE SKIN. SYMPTOMS MAY INCLUDE REDNESS, BURNING, DRYING AND CRACKING, AND SKIN BURNS. TOXIC AMOUNTS MAY BE ABSORBED THROUGH THE SKIN IF LARGE AREAS OF SKIN ARE EXPOSED.

INHALATION:
MAY CAUSE IRRITATION OF NASAL AND RESPIRATORY PASSAGES AND/OR CENTRAL NERVOUS SYSTEM EFFECTS SUCH AS DIZZINESS, DROWSINESS, WEAKNESS, FATIGUE, NAUSEA, HEADACHE, UNCONSCIOUSNESS AND DEATH.

INGESTION:
THIS MATERIAL CAN ENTER THE LUNGS DURING SWALLOWING OR VOMITING AND CAUSE LUNG INFLAMMATION AND/OR DAMAGE.

IF MORE THAN A FEW MOUTHFULS ARE SWALLOWED, ABDOMINAL DISCOMFORT, NAUSEA AND DIARRHEA MAY OCCUR. IN CHILDREN ACCIDENTAL INGESTION OF AS LITTLE AS 10-15 GRAMS(0.5 OZ) HAS CAUSED DEATH. IN ADULTS, INGESTION OF 20-50 GRAMS(1 TO 2OZ) HAS PRODUCED SYMPTOMS OF POISONING.

ROUTE OF EXPOSURE:
EYE CONTACT, INHALATION, INGESTION, SKIN ABSORPTION AND CONTACT

CHRONIC EFFECTS:

PRODUCT INFORMATION:

A CHRONIC INHALATION STUDY OF WHOLLY VAPORIZED GASOLINE FOUND A DOSE-RELATED INCIDENCE OF KIDNEY CANCER IN MALE RATS. IT HAS SINCE BEEN DETERMINED THAT MALE RATS DEVELOP THESE TUMORS IN A UNIQUE MANNER,THROUGH THE FORMATION OF ALPHA-2U GLOBULIN. HUMANS DO NOT FORM ALPHA-2U GLOBULIN AND THEREFORE TUMORS RESULTING FROM THIS MECHANISM ARE NOT RELEVANT TO HUMANS. AN INCREASE OF LIVER CANCER AT THE HIGHEST DOSE LEVEL(2056 PPM) IN FEMALE MICE WAS DEMONSTRATED. THE RELATIONSHIP AND SIGNIFICANCE OF THESE RESULTS TO HUMANS IS NOT KNOWN.

EPIDEMIOLOGY DATA FROM OVER 18,000 PETROLEUM MARKETING AND DISTRIBUTION WORKERS SHOWED NO INCREASED RISK OF LEUKEMIA, MULTIPLE MYLEOMA, OR KIDNEY CANCER FROM GASOLINE EXPOSURE.

INTENTIONAL EXPOSURE TO HIGH CONCENTRATIONS OF GASOLINE (AS IN CASES OF ABUSE) HAVE BEEN REPORTED TO RESULT IN IRREVERSIBLE BRAIN DAMAGE, CONVULSIONS, DELIRIUM, ASTHMA-LIKE BRONCHOSPASMS AND/OR SUDDEN DEATH DUE TO CARDIAC SENSITIZATION. THESE EFFECTS ARE NOT EXPECTED TO OCCUR AT EXPOSURE LEVELS ENCOUNTERED IN THE NORMAL USE AND DISTRIBUTION OF GASOLINE AS A MOTOR FUEL.

IARC HAS IDENTIFIED GASOLINE AND GASOLINE EXHAUST AS A POSSIBLE HUMAN CARCINOGEN (GROUP 2B).

SUPPLEMENTAL INFORMATION ON COMPONENTS IS PRESENTED IN SECTION 11 TOXICOLOGICAL INFORMATION.

MEDICAL CONDITIONS AGGRAVATED:
PREEXISTING EYE, SKIN, RESPIRATORY, LIVER, AND/OR KIDNEY DISORDERS MAY BE AGGRAVATED BY EXPOSURE TO GASOLINE. INDIVIDUALS WITH PREEXISTING HEART DISORDERS MAY BE MORE SUSCEPTIBLE TO ARRHYTHMIAS (IRREGULAR HEARTBEATS) IF EXPOSED TO HIGH CONCENTRATIONS OF GASOLINE.

SECTION 4 - FIRST AID INFORMATION

EYE:
FLUSH WITH LARGE AMOUNTS OF WATER, LIFTING UPPER AND LOWER LIDS OCCASIONALLY. REMOVE CONTACT LENSES IF WORN. GET MEDICAL ATTENTION IF IRRITATION CONTINUES.

SKIN:
THOROUGHLY WASH EXPOSED AREA WITH SOAP AND WATER. REMOVE CONTAMINATED CLOTHING AND SHOES. LAUNDER CONTAMINATED CLOTHING BEFORE RE-USE. DISCARD SHOES IF THEY CANNOT BE CLEANED SUFFICIENTLY.

INHALATION:
IF AFFECTED, REMOVE INDIVIDUAL TO FRESH AIR. IF BREATHING IS DIFFICULT, ADMINISTER OXYGEN. IF BREATHING HAS STOPPED GIVE ARTIFICIAL RESPIRATION. KEEP PERSON WARM, QUIET AND GET MEDICAL ATTENTION.

INGESTION:
DO NOT INDUCE VOMITING, KEEP PERSON WARM, QUIET, AND GET MEDICAL ATTENTION. ASPIRATION OF MATERIAL INTO THE LUNGS DUE TO VOMITING CAN CAUSE CHEMICAL PNEUMONIA WHICH CAN BE FATAL. IF VOMITING OCCURS SPONTANEOUSLY, KEEP HEAD BELOW HIPS TO PREVENT ASPIRATION INTO LUNGS AND GET IMMEDIATE MEDICAL ATTENTION.

SECTION 5 - FIRE AND EXPLOSION DATA

NFPA CODES:
NFPA Codes: Health: 1 Flammability: 3 Reactivity: 0

FIRE AND EXPLOSION HAZARDS:
LEL= 1.3-1.5 UEL= 7.1-7.6

NEVER USE WELDING OR CUTTING TORCH ON OR NEAR DRUM (EVEN EMPTY) BECAUSE PRODUCT (EVEN JUST RESIDUE) CAN IGNITE EXPLOSIVELY.

MATERIAL IS HIGHLY VOLATILE AND READILY GIVES OFF VAPORS WHICH MAY TRAVEL ALONG THE GROUND OR BE MOVED BY VENTILATION AND IGNITED BY PILOT LIGHTS,

OTHER FLAMES, SPARKS, HEATERS, SMOKING, ELECTRIC MOTORS, STATIC DISCHARGE, OR OTHER IGNITION SOURCES AT LOCATIONS DISTANT FROM MATERIAL HANDLING. FLASHBACK MAY OCCUR ALONG VAPOR TRAIL.

CONTAINERS MAY EXPLODE IN HEAT OF FIRE. COOL FIRE EXPOSED CONTAINERS WITH WATER SPRAY.

VAPOR EXPLOSION HAZARD INDOORS, OUTDOORS AND/OR IN SEWERS. RUNOFF TO SEWER MAY CREATE FIRE OR EXPLOSION HAZARD.

ALL FIVE GALLON PAILS AND LARGER METAL CONTAINERS INCLUDING TANK CARS AND TANK TRUCKS SHOULD BE GROUNDED AND/OR BONDED WHEN MATERIAL IS TRANSFERRED.

SEE ADDITIONAL INFORMATION IN SECTION 7.

EXTINGUISHING MEDIA:
REGULAR FOAM, WATER FOG, DRY CHEMICAL, CARBON DIOXIDE

DO NOT SPRAY WATER DIRECTLY ON FIRE. PRODUCT WILL FLOAT ON SURFACE OF WATER AND CAN BE REIGNITED.

FIRE FIGHTING MEASURES:
CLEAR AREA OF UNPROTECTED PERSONNEL. WEAR SELF-CONTAINED BREATHING APPARATUS WITH A FULL FACEPIECE OPERATED IN THE POSITIVE PRESSURE DEMAND MODE WHEN FIGHTING FIRES. ISOLATE FOR 1/2 MILE IN ALL DIRECTIONS IF TANK, RAIL CAR, OR TANK TRUCK IS INVOLVED IN FIRE.

DECOMPOSITION PRODUCTS:
UPON COMBUSTION, CARBON MONOXIDE, CARBON DIOXIDE, VARIOUS HYDROCARBONS, SMALL AMOUNTS OF SULFUR AND NITROGEN COULD BE FORMED.

SECTION 6 - ACCIDENTAL RELEASE MEASURES

SMALL SPILL & LEAK PROTECTION:
ELIMINATE ALL SOURCES OF IGNITION SUCH AS FLARES, FLAMES (INCLUDING PILOT LIGHTS), AND ELECTRICAL SPARKS.

ABSORB LIQUID ON VERMICULITE, FLOOR ABSORBENT OR OTHER ABSORBENT MATERIAL.

LARGE SPILL & LEAK PROTECTION:
U.S. REGULATIONS REQUIRE REPORTING SPILLS OF THIS MATERIAL WHICH ENTER INTO OR LEAD TO SURFACE WATERS CAUSING A SHEEN. THESE SPILLS MUST BE REPORTED TO THE U.S. COAST GUARD NATIONAL RESPONSE CENTER AT (800) 424-8802.

ELIMINATE ALL IGNITION SOURCES (FLARES, FLAMES, PILOT LIGHTS, ELECTRICAL SPARKS, SMOKING, STATIC DISCHARGE ETC.). PERSONS NOT WEARING PROTECTIVE EQUIPMENT SHOULD BE EXCLUDED FROM AREA OF SPILL UNTIL CLEAN-UP HAS BEEN COMPLETED. STOP SPILL AT SOURCE ONLY IF SAFE TO DO SO. PREVENT FROM ENTERING DRAINS, SEWERS, STREAMS OR OTHER BODIES OF WATER. USE WATER FOG TO SUPRESS

VAPOR CLOUD. DIKE AND CONTAIN IF POSSIBLE. REPORT ALL SPILLS IN ACCORDANCE WITH FEDERAL, STATE AND LOCAL REGULATIONS. USE EQUIPMENT SUITABLE FOR FLAMMABLE LIQUID AND VAPORS, PUMP OR VACUUM TRANSFER SPILLED PRODUCT TO CLEAN CONTAINERS FOR RECOVERY. ABSORB UNRECOVERABLE PRODUCT. TRANSFER CONTAMINATED ABSORBENT, SOIL AND OTHER MATERIALS, TO CONTAINERS FOR DISPOSAL.

NOTE! STATE AND LOCAL REGULATIONS MAY BE MORE STRINGENT THAN FEDERAL.

SECTION 7 - HANDLING AND STORAGE

STORAGE CONDITIONS:

KEEP AWAY FROM ALL IGNITION SOURCES SUCH AS HEAT, SPARKS, OPEN FLAME, SMOKING AND STATIC DISCHARGE. KEEP CONTAINERS CLOSED WHEN NOT IN USE. PROVIDE ADEQUATE VENTILATION TO PREVENT EXCEEDING RECOMMENDED EXPOSURE LIMITS OR BUILDUP OF EXPLOSIVE VAPORS.

CONTAINERS OF THIS MATERIAL MAY BE HAZARDOUS WHEN EMPTIED. SINCE EMPTIED CONTAINERS RETAIN PRODUCT RESIDUES (VAPOR, LIQUID, AND/OR SOLID), ALL HAZARD PRECAUTIONS GIVEN IN THIS DATASHEET MUST BE OBSERVED.

ADDITIONAL INFORMATION:

NEVER SIPHON OR PIPET GASOLINE BY MOUTH. GASOLINE SHOULD NOT BE USED AS A SOLVENT OR AS A CLEANING AGENT, ONLY AS A MOTOR FUEL. DO NOT TRANSFER LIQUID TO AN UNLABELED CONTAINER. KEEP CONTAINER CLOSED. USE NON-SPARKING TOOLS AND EXPLOSION-PROOF EQUIPMENT. USE IN WELL VENTILATED AREA AWAY FROM ALL IGNITION SOURCES. ALL 5 GAL PAILS AND LARGE METAL CONTAINERS SHOULD BE GROUNDED AND/OR BONDED WHEN MATERIAL IS TRANSFERRED.

PORTABLE CONTAINERS OF 12 GALLONS(45 LITERS) OR LESS SHOULD NEVER BE FILLED WITH GASOLINE WHILE THEY ARE IN OR ON A MOTOR VEHICLE OR MARINE CRAFT. STATIC ELECTRIC DISCHARGE CAN IGNITE FUEL VAPORS WHEN FILLING NON-GROUNDED CONTAINERS OR VEHICLES ON TRAILERS. CONTAINERS SHOULD BE PLACED ON THE GROUND. THE NOZZLE SPOUT MUST BE KEPT IN CONTACT WITH THE CONTAINER BEFORE AND DURING THE ENTIRE FILLING OPERATION.

SECTION 8 - PERSONAL PROTECTION

RESPIRATORY PROTECTION:

IF WORKPLACE EXPOSURE LIMIT(S) OF PRODUCT OR ANY COMPONENT IS EXCEEDED (SEE SECTION II), A NIOSH/MSHA APPROVED AIR SUPPLIED RESPIRATOR IS ADVISED IN ABSENCE OF PROPER ENVIRONMENTAL CONTROL. OSHA REGULATIONS ALSO PERMIT OTHER NIOSH/MSHA RESPIRATORS (NEGATIVE PRESSURE TYPE) UNDER SPECIFIED CONDITIONS (SEE YOUR INDUSTRIAL HYGIENIST). ENGINEERING OR ADMINISTRATIVE CONTROLS SHOULD BE IMPLEMENTED TO REDUCE EXPOSURE.

VENTILATION:

PROVIDE SUFFICIENT MECHANICAL (GENERAL AND/OR LOCAL EXHAUST) VENTILATION TO MAINTAIN EXPOSURE BELOW TLV(S).

GLOVES:

WEAR RESISTANT GLOVES SUCH AS: NEOPRENE, VITON, NITRILE RUBBER, POLYVINYL ALCOHOL(PVA).

EYES:

CHEMICAL SPLASH GOGGLES IN COMPLIANCE WITH OSHA REGULATIONS ARE ADVISED; HOWEVER, OSHA REGULATIONS ALSO PERMIT OTHER TYPE SAFETY GLASSES. CONSULT YOUR SAFETY REPRESENTATIVE.

OTHER:

AVOID ALL SKIN CONTACT. TO PREVENT REPEATED OR PROLONGED SKIN CONTACT, WEAR IMPERVIOUS CLOTHING AND BOOTS.

USE EXPLOSION PROOF EQUIPMENT ONLY.

SECTION 9 - PHYSICAL AND CHEMICAL PROPERTIES

Physical State: LIQUID
Physical Appearance: CLEAR
Odor: HYDROCARBON ODOR
Boiling Point: 74-460 DEG F @760.00 MMHG
Melting Point: N.A.
Freezing Point: N.A.
Vapor Pressure: >259.00 MMHG @68.00 DEG F
Vapor Density: 3.00
Water Solubility: N.A.
Molecular Weight: N.A.
Specific Gravity: 0.7000-0.7700 @ 68.00 F
Viscosity: N.A.
Volatile Organic Compound: N.A.
% Volatile: 100
Solvent: N.A.
Solids: N.A.
Ash: N.A.
Evaporation Rate: N.A.
pH: N.A.
Corrosion Rate: N.A.

ADDITIONAL PHYSICAL PROPERTY INFORMATION

Property: DENSITY
Amount: > 5.830 @68.00 DEG F
Units Of Measure: POUNDS/GALLON

Property: FLASH POINT
Amount: -40 F

Property: ODOR THRESHOLD
Amount: 0.25 PPM

SECTION 10 - STABILITY AND REACTIVITY

STABLITY AND REACTIVITY:
STABLE

HAZARDOUS POLYMERIZATION:
CANNOT OCCUR

CONDITIONS TO AVOID:
ALL SOURCES OF IGNITION AND CONTACT WITH STRONG OXIDIZING AGENTS SUCH AS PEROXIDES, NITRIC ACID, PERCHLORATES, AND CHLORINE.

SECTION 11 - TOXICOLOGICAL INFORMATION

ORAL LD50:
IN CHILDREN, DEATH FROM ACCIDENTAL INGESTION OF AS LITTLE AS 10 TO 15 GRAMS

(0.5 OZ) OF GASOLINE HAS BEEN OBSERVED. IN ADULTS, INGESTION OF 20 TO 50 GRAMS(1 TO 2 OZ) OF GASOLINE MAY PRODUCE SEVERE SYMPTOMS OF POISONING.

DERMAL LD50:
NO VALUES AVAILABLE. REPEATED OR CHRONIC DERMAL CONTACT MAY RESULT IN DRYING OF THE SKIN, LESIONS, AND OTHER DERMATOLOGICAL CONDITIONS.

INHALATION LC50:
HUMAN INHALATION (ACUTE) 2000 PPM (APPROXIMATELY 7.6 MG/L)/1 HOUR EFFECTS: DIZZINESS, MUCOUS MEMBRANE IRRITATION, AND ANESTHESIA.
HUMAN INHALATION (CHRONIC) >500 PPM (APPROXIMATELY 1.8 MG/L)/DAY. EFFECTS: MAY CAUSE VOMITING,DIARRHEA, INSOMNIA, HEADACHE, DIZZINESS, ANEMIA, MUSCLE AND NEUROLOGICAL SYMPTOMS.
PUBLISHED VALUES - LC50 RAT: 300 G/M(3)/5 MIN.
LC50 MOUSE: 300 G/M(3)/5 MIN.
LC50 GUINEA PIG: 300 G/M(3)/5 MIN.

EYE IRRITATION:

HUMAN	DOSE=140 PPM/8 HR	REACTION= MILD
	DOSE=500 PPM/1 HR	REACTION= MODERATE

THE FOLLOWING POINTS REPRESENT DATA UNIQUE TO COMPONENTS WHICH ARE NOT PRESENTED IN THE ACUTE AND CHRONIC EFFECTS DATA FOR THE OVERALL PRODUCT IN SECTION 3 HAZARDS IDENTIFICATION.

1. ETHANOL- ETHANOL IS CLASSIFIED AS A CARCINOGEN BY IARC WHEN CONSUMED AS AN ALCOHOLIC BEVERAGE. OCCUPATIONAL EXPOSURES OTHER THAN INGESTION, HAVE NOT BEEN SHOWN TO CAUSE CANCER IN HUMANS.
2. N-BUTANE- NORMAL BUTANE HAS A NARCOTIC EFFECT AT HIGH CONCENTRATIONS.
3. TOLUENE- INHALATION AT HIGH LEVELS CAN PRODUCE CARDIAC SENSITIZATION AND HEARING LOSS. THE EFFECTS OF SOLVENTS ON HEARING LOSS ARE UNCERTAIN. TOLUENE IS A KNOWN HUMAN REPRODUCTIVE HAZARD.
4. XYLENE- HIGH EXPOSURES TO XYLENE MAY CAUSE HEARING LOSS, HEART STRESS, ANEMIA, RESPIRATORY DISTRESS,AND BLEEDING FROM MUCOSAL SURFACES.
5. BENZENE- STUDIES HAVE DEMONSTRATED IMMUNOTOXICITY,REPRODUCTIVE TOXICITY, EMBRYO/FETOTOXICITY AND EVIDENCE OF CHROMOSOMAL DAMAGE/CHANGES. OVEREXPOSURE TO BENZENE MAY PRODUCE VARIOUS BLOOD DISORDERS INCLUDING ANEMIA AND LEUKEMIA.
6. 1,2,4 TRIMETHYLBENZENE- OVEREXPOSURE MAY PROVOKE ASTHMATIC BRONCHITIS AND MAY ADVERSELY AFFECT THE BLOOD.
7. COMBUSTION PRODUCTS-OVEREXPOSURE TO CARBON MONOXIDE CAN CAUSE HEADACHE, NAUSEA, NERVOUS SYSTEM DEPRESSION, COMA, HEART AND BRAIN DAMAGE AND DEATH. OVEREXPOSURE TO CARBON DIOXIDE CAN CAUSE SIMPLE ASPHYXIATION.

SECTION 12 - ECOLOGICAL INFORMATION
FISH LC50:
N.A.

INVERTEBRATE LC50:
N.A.

PLANT LC50:
N.A.

ECOTOX SUMMARY:
FRESHWATER TOXICITY:
BLUEGILL - LC50 8 PPM/96 HOUR
JUVENILE AMERICAN SHAD -TLM 90 PPM/24 HOUR.
SALTWATER TOXICITY:
JUVENILE AMERICAN SHAD - TLM 91/24 HOUR; TOTAL KILL: GREATER THAN 114 PPM/24 HOUR.
GRASS SHRIMP - LC50 1.5 PPM/96 HOUR.

MULLET - LC50 4 PPM/96 H

BIODEGRADATION:
N.A.

ACCUMULATION:
NO POTENTIAL FOR ACCUMULATION OR CONCENTRATION IN THE FOOD CHAIN.

MOBILITY:
N.A.

STABILITY:
N.A.

SECTION 13 - DISPOSAL CONSIDERATIONS

DISPOSE OF IN ACCORDANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL REGULATIONS.

THIS MATERIAL SHOULD BE KEPT OUT OF WATER SOURCES AND SEWERS.

IF DISCARDED, THIS MATERIAL MAY MEET THE CRITERIA OF A HAZARDOUS WASTE AS DEFINED BY USEPA UNDER RCRA (40 CFR 261) OR OTHER STATE AND LOCAL REGULATIONS. TO MAKE A CORRECT DETERMINATION, MEASUREMENT OF CERTAIN PHYSICAL PROPERTIES AND ANALYSIS FOR REGULATED COMPONENTS MAY BE NECESSARY.

NOTE! STATE AND LOCAL DISPOSAL REGULATIONS MAY BE MORE STRINGENT THAN FEDERAL.

SECTION 14 - TRANSPORT INFORMATION

DOT Proper Shipping Name: Gasoline
Symbols: N.A.
UN/NA Number: UN1203
Hazard Class: 3
Not Otherwise Specified: N.A.
Exemption Number: N.A.
Limited Quantity: N
Reportable Quantity: N.A.
Ammo Compatible Group: N.A.
Coast Guard Ammo Group: N.A.
Packing Group: II
Exceptions: 150
Special Label: FLAMMABLE LIQUID
Special Shipping Provisions: B33, T8,B101

Non Bulk: 202
Bulk: 242
Air Rail Max: 5 L
Air Cargo Max: 60 L
Other Stowage: N.A.
Vessel Stowage: E

INTERNATIONAL TRANSPORT INFORMATION

IMO: N.A.
ICAO: N.A.
IATA: N.A.
Transport Canada: N.A.
ADR: N.A.

RID: N.A.

SECTION 15 - REGULATORY INFORMATION

SARA CODES

Fire: YES Pressure: NO Reactive: NO Acute: YES Chronic: YES

REGULATORY LISTED COMPONENTS

Ingredient	Carcinogen	Regulatory List Information
GASOLINE-INCLUDES COMPOUNDS LISTED BELOW	NTP NO IARC YES OSHA NO	NO REGULATORY LIST INFORMATION AVAILABLE
METHYL TERT-BUTYL ETHER	NTP NO IARC NO OSHA NO	CLEAN AIR ACT HAP CLEAN AIR ACT ORGANIC HAZARDOUS AIR POLLUTANT CLEAN AIR ACT SOCMI LIST CLEAN AIR ACT VOLATILE HAZAROUS AIR POLLUTANT MA RTK SUBSTANCE LIST SARA SECTION 313 CERCLA REPORTABLE QUANTITY 1000 LB
ETHYL ALCOHOL (ETHANOL)	NTP NO IARC NO OSHA NO	CA PROP 65 MA RTK SUBSTANCE LIST
ISOPENTANE	NTP NO IARC NO OSHA NO	CLEAN AIR ACT 112(R) LIST MA RTK SUBSTANCE LIST
N-BUTANE	NTP NO IARC NO OSHA NO	CLEAN AIR ACT 112(R) LIST MA RTK SUBSTANCE LIST
TOLUENE	NTP NO IARC NO OSHA NO	CA PROP 65 CLEAN AIR ACT HAP CLEAN AIR ACT ORGANIC HAZARDOUS AIR POLLUTANT CLEAN AIR ACT SOCMI LIST CLEAN AIR ACT VOLATILE HAZAROUS AIR POLLUTANT MA RTK SUBSTANCE LIST OPA HAZARDOUS SUBSTANCE 40 CFR 116.4 SARA SECTION 313 CERCLA REPORTABLE QUANTITY 1000 LB WATER POLLUTION CONTROL ACT SECTION 307
XYLENE	NTP NO IARC NO OSHA NO	CLEAN AIR ACT HAP CLEAN AIR ACT ORGANIC HAZARDOUS AIR POLLUTANT CLEAN AIR ACT SOCMI LIST CLEAN AIR ACT VOLATILE HAZAROUS AIR POLLUTANT MA RTK SUBSTANCE LIST OPA HAZARDOUS SUBSTANCE 40 CFR 116.4 SARA SECTION 313 CERCLA REPORTABLE QUANTITY 100 LB
BENZENE	NTP YES IARC YES OSHA YES	CA PROP 65 CLEAN AIR ACT HAP CLEAN AIR ACT ORGANIC HAZARDOUS AIR POLLUTANT CLEAN AIR ACT SOCMI LIST CLEAN AIR ACT VOLATILE HAZAROUS AIR POLLUTANT

		MA RTK SUBSTANCE LIST OPA HAZARDOUS SUBSTANCE 40 CFR 116.4 SARA SECTION 313 CERCLA REPORTABLE QUANTITY 10 LB WATER POLLUTION CONTROL ACT SECTION 307
METHYL-2-PENTANE	NTP NO IARC NO OSHA NO	NO REGULATORY LIST INFORMATION AVAILABLE
METHYL-3-PENTANE	NTP NO IARC NO OSHA NO	MA RTK SUBSTANCE LIST
NORMAL PENTANE	NTP NO IARC NO OSHA NO	CLEAN AIR ACT 112(R) LIST MA RTK SUBSTANCE LIST
1,2,4- TRIMETHYLBENZENE	NTP NO IARC NO OSHA NO	MA RTK SUBSTANCE LIST SARA SECTION 313
HEXANE	NTP NO IARC NO OSHA NO	CLEAN AIR ACT HAP CLEAN AIR ACT ORGANIC HAZARDOUS AIR POLLUTANT CLEAN AIR ACT SOCMI LIST CLEAN AIR ACT VOLATILE HAZAROUS AIR POLLUTANT MA RTK SUBSTANCE LIST SARA SECTION 313 CERCLA REPORTABLE QUANTITY 5000 LB
2-METHYLHEXANE	NTP NO IARC NO OSHA NO	MA RTK SUBSTANCE LIST
3-METHYLHEXANE	NTP NO IARC NO OSHA NO	MA RTK SUBSTANCE LIST
DIMETHYL-2,3-BUTANE	NTP NO IARC NO OSHA NO	MA RTK SUBSTANCE LIST
ETHYLBENZENE	NTP NO IARC NO OSHA NO	CLEAN AIR ACT HAP CLEAN AIR ACT ORGANIC HAZARDOUS AIR POLLUTANT CLEAN AIR ACT SOCMI LIST CLEAN AIR ACT VOLATILE HAZAROUS AIR POLLUTANT MA RTK SUBSTANCE LIST OPA HAZARDOUS SUBSTANCE 40 CFR 116.4 SARA SECTION 313 CERCLA REPORTABLE QUANTITY 1000 LB WATER POLLUTION CONTROL ACT SECTION 307
HEPTANE	NTP NO IARC NO OSHA NO	MA RTK SUBSTANCE LIST

SECTION 16 - OTHER INFORMATION

The information accumulated herein is believed to be accurate but is not warranted to be whether originating with the company or not. Recipients are advised to confirm in advance of need that the information is current, applicable and suitable to their circumstances. The MSDS has been prepared in accordance with OSHA's Hazard Communication Standard 29 CFR 1910.1200. The information relates specifically to the product designated and may not be valid when the material is used in combination with other materials or products or in a particular process.

MATERIAL SAFETY
DATA SHEET

Material Name
Quaker State High Performance 80W90 Gear Lubricant

Issue Date: 12/15/1994
MSDS No.: QS-042

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Chemical Name: Petroleum distillate mixture
Internal Part No.: Order Nos. 60138 (case\12x1qt); 60125 (35 lb); 60126 (120 lb); 60127 (400 lb)
Product Use:

Manufacturer Information

Quaker State Corporation
225 E. John Carpenter Freeway
Irving, Texas 75062
----PHONE #: (800)562-5928
EMERGENCY #: (214)868-0416
Mfg. Part #NA

Supplier Information

Sup. Part #NA

Synonyms: Gear Lubricant

Section 2 - COMPOSITION / INFORMATION ON INGREDIENTS

CAS #	Components	% Vol
64742-65-0	Petroleum Distillates, Solvent Dewaxed Heavy Paraffinic	25-35
64742-62-7	Residual Oils (petroleum), Solvent Dewaxed	55-60
72162-26-6	Olefin sulfide	2-5
71888-91-0	Alkylamine salts of phosphoric acid esters	1-2

Component Information/Information on Non-Hazardous Components
The manufacturer lists no ingredients as hazardous according to OSHA 29 CFR 1910.1200. All mineral oils used in this product have been severely hydrotreated and/or solvent refined.

Section 3 - HAZARDS IDENTIFICATION

Emergency Overview
This product is a viscous brown liquid. It will burn at elevated temperatures (above 390 deg F). Addition of water or foam to the fire may cause frothing. Use dry chemical or carbon dioxide for small fires, water spray or foam for large fires.

Label Information
None.

Continued on next page...

Potential Health Effects

yes
This product is irritating to the eyes. High vapor/aerosol concentrations may be irritating. Temporary redness or burning may occur.

kin
Prolonged or repeated contact with skin may cause mild irritation and possibly dermatitis.

ngestion
Small amounts of this product, if aspirated into the lungs, may cause mild to severe pulmonary injury.

nhalation
High vapor/aerosol concentrations may be irritating to the respiratory tract. Vapors may irritate mucous membranes. Exposure to high concentrations of vapor may cause central nervous system depression.

Section 4 - FIRST AID MEASURES

yes
Flush eyes with large amounts of water for 15 minutes. If eyes become inflamed, seek medical advice.

kin
Remove contaminated clothing. Wash affected area with mild soap and water. Launder contaminated clothing before reuse. If leather articles become saturated they should be discarded.

ngestion
Do not induce vomiting unless instructed to do so by a physician. Never give anything by mouth to an unconscious person. Call your local poison control center or get medical attention.

nhalation
Remove to fresh air. If not breathing, give mouth to mouth resuscitation. If breathing is difficult, give oxygen. Call a physician.

otes to Physician
This material, if aspirated into the lungs, may cause chemical pneumonitis; treat the affected person appropriately.

Section 5 - FIRE FIGHTING MEASURES

lash Point	: 390 deg F (198 deg C)
ethod Used	: Cleveland Open Cup
pper Flammable Limit (UFL)	: Not determined
ower Flammable Limit (LFL)	: Not determined
uto Ignition	: Not determined
lammability Classification	: IIIB
ate of Burning	: Not determined

Continued on next page...

General Fire Hazards
"Empty" containers retain product residue (liquid and/or vapor) and can be dangerous. Do not cut, weld, solder, drill, grind, or expose containers to heat, flame, sparks, or other sources of ignition.

Hazardous Combustion Products
Carbon monoxide, carbon dioxide, and oxides of sulfur, nitrogen, boron and phosphorus.

Extinguishing Media
Dry chemical or carbon dioxide for small fires. Water spray or foam for large fires.

Fire Fighting Equipment/Instructions
Use water spray to cool fire-exposed containers and as a protective screen. Do not point solid water stream directly into burning oil to avoid spreading.

NFPA Ratings: Health: 1 Fire: 1 Reactivity: 0 Other:

HMIS Ratings: Health: 1 Fire: 1 Reactivity: 0
Personal Protection: chemical goggles/gloves

Section 6 - ACCIDENTAL RELEASE MEASURES

Containment Procedures
Absorb with inert absorbent such as dry clay, sand or diatomaceous earth, commercial sorbents, or recover using pumps. Scoop up used absorbent into drums.

Clean-Up Procedures
Do not allow the spilled product to enter public drainage system or open water courses. Surfaces may become slippery after spillage.

Evacuation Procedures
Isolate area. Keep unnecessary personnel away.

Special Instructions
Wear appropriate protective equipment and clothing during clean-up.

Section 7 - HANDLING AND STORAGE

Procedures for Handling
Wash hands after handling and before eating. Launder work clothes frequently. Avoid inhalation and skin contact. Empty drums should be completely drained, properly bunged and promptly returned to a drum reconditioner, or promptly disposed of.

Recommended Storage Methods
Store away from strong oxidizers.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

Continued on next page...

Exposure Guidelines

A. General Product Information

If oil mists are generated, observe the OSHA exposure limit of 5 mg/m3.

B. Component Exposure Limits

No ACGIH, NIOSH or OSHA exposure guidelines listed for this product's components.

Engineering Ctrl.: Use general ventilation and use local exhaust, where possible, in confined or enclosed spaces.

PERSONAL PROTECTIVE EQUIPMENT

Eye/Face: None normally required; chemical goggles if splashing or high-pressure system is used.

Skin: For prolonged contact (2 hours) with product as sold, or for any contact with used oil, nitrile or viton gloves are recommended.

Respiratory: If mist is generated (heating, spraying) and engineering controls are not sufficient, wear approved organic vapor respirator suitable for oil mist.

General: Use good hygiene when handling petroleum product.

Section 9 - PHYSICAL & CHEMICAL PROPERTIES

Appearance	: Brown	Odor	: Not available
Physical State	: Liquid	pH	: Not available
Vapor Pressure	: Not available	Vapor Density	: Not available
Boiling Point	: Not available	Freezing Point	: Not available
Melting Point	: Not available	Solubility (H20)	: Not available
Specific Gravity	: 0.88-0.90	Particle Size	: Not available
Softening Point	: Not available	Evaporation Rate	: Not available
Viscosity	: Approx. 674 SUS @ 100 F	Bulk Density	: Not available
Percent Volatile	: Not available	Molecular Weight	: Mixture

Additional Properties

None.

Section 10 - CHEMICAL STABILITY & REACTIVITY INFORMATION

Chemical Stability: Stable

Conditions to Avoid: Avoid excessive heat, formation of mists.

Incompatibility

Strong oxidizing agents (peroxides, chlorine, strong acids).

Hazardous Decomposition Products

At thermal decomposition temperatures carbon monoxide, carbon dioxide, and oxides of sulfur, nitrogen, boron and phosphorus.

Hazardous Polymerization

Will not occur.

Continued on next page...

Section 11 - TOXICOLOGICAL INFORMATION

Acute Toxicity/Target Organ Information

A. General Product/Component Information

No data available for product.

B. Component LD50/LC50

Epidemiology

No data available for product.

Carcinogenicity

A. General Product/Component Information

No data available on the product as a whole.

B. Component Carcinogenicity Listings

None of this product's components are listed by ACGIH, IARC, NIOSH, NTP or OSHA.

Teratogenicity/Reproductive Effects

No data available for the product as a whole. Review of information on components indicates no components at greater than 1.0% have teratogenic effects.

Neurotoxicity

No data available on this product as a whole. High vapor/aerosol concentrations (attainable only at elevated temperatures) may cause central nervous system effects such as dizziness, drowsiness or headaches.

Mutagenicity

No data available on this product as a whole. Review of information on components indicates no components at greater than 1.0% have mutagenic effects.

Other Information

No other information available.

Section 12 - ECOLOGICAL INFORMATION

Ecotoxicity

No information is available on ecotoxicity of this product. Keep product out of sewers and waterways.

Environmental Fate

No information is available.

Section 13 - DISPOSAL CONSIDERATIONS

US EPA Waste Number & Descriptions

A. General Product Information

Material, if discarded, is not expected to be a characteristic hazardous waste under RCRA. No components are identified as hazardous wastes.

B. Component Waste Numbers

No EPA Waste Numbers are applicable for this product's components.

Continued on next page...

Disposal Instructions
Used oil can be returned to a collection center or provided to a licensed recycler. All wastes must be handled in accordance with local, state and federal regulations.

Section 14 - TRANSPORTATION INFORMATION

DOT Information
Shipping Name: Not regulated as a hazardous material.
Hazard Class: None
UN/NA #: None
Packing Group: None
Label(s) Required

Additional Shipping Information
None.
International Transportation Regulations
Not regulated as dangerous goods.

Section 15 - REGULATORY INFORMATION

JS Federal Regulations
A. General Product Information
No additional information.
B. Component Information
None of this product's components are listed under SARA Section 302 (40 CFR 355 Appendix A), SARA Section 313 (40 CFR 372.65) or CERCLA (40 CFR 302.4).
State Regulations
A. General Product Information
No additional information.
B. Component Information
None of this product's components are listed on the state lists from CA, FL, MA, MN, NJ, or PA.
Other Regulations
A. General Product Information
No additional information.
B. Component Information
None of this product's components are listed on the Canadian Controlled Product Ingredient Disclosure List.

Section 16 - OTHER INFORMATION

Other Information
This information is, to the best of Quaker State Corporation's

Continued on next page...

knowledge and belief, accurate and reliable. However, no representation, warranty, or guarantee is made to its accuracy, reliability, or completeness. It is the user's responsibility to satisfy himself as to the suitableness and completeness of such information for his own particular use.

Preparation Information: last revised 12/15/94.

Key/Legend

NA = Not Applicable; ND = Not Determined; Y = Yes; N = No

Contact Person: Vince Bernard, Corporate Safety Director
Phone: (214)868-0416

End of MSDS #QS-042

Print Date: 08/02/1996

Material Safety Data Sheet

Prepared According to the OSHA Hazard Communication Standard (29 CFR 1910.1200). (Formerly Called MATERIAL INFORMATION BULLETIN)

Chevron

CHEVRON Universal Gear Lubricant SAE 80W-90 CPS 250102

TYPICAL COMPOSITION

Highly refined base oils (CAS 64742-54-7 or 64742-65-0 or 72623-85-9, and/or 64742-57-0 or 72623-83-7 or 64742-01-4)	>90%
Additives including inhibitors and extreme pressure agent and/or thickener (CAS 9003-27-4)	<10%

EXPOSURE STANDARD

No Federal OSHA exposure standard or ACGIH TLV has been established for this material. Based upon information reviewed to date, this product fits the definition for mineral oil mist. The applicable Federal OSHA exposure standard and ACGIH TLV (1985-86) for mineral oil mist is 5 mg/m^3.

PHYSIOLOGICAL & HEALTH EFFECTS	EMERGENCY & FIRST AID PROCEDURES
Eyes	
Expected to cause no more than minor eye irritation.	Flush eyes immediately with fresh water for at least 15 minutes while holding the eyelids open. If irritation persists, see a doctor.
Skin	
Expected to cause no more than minor skin irritation following prolonged or frequently repeated contact.	Wash skin thoroughly with soap and water. Launder contaminated clothing.
Inhalation	
Not expected to be acutely toxic by inhalation. Breathing mineral oil mist at concentrations in air that exceed the recommended exposure standard can cause respiratory irritation or discomfort. See Additional Health Data.	If respiratory discomfort or irritation occurs, move the person to fresh air. See a doctor if discomfort or irritation continues.
Ingestion	
Not expected to have acute systemic toxicity by ingestion.	If swallowed, give water or milk to drink and telephone for medical advice. Consult medical personnel before inducing vomiting. If medical advice cannot be obtained, then take the person and product container to the nearest medical emergency treatment center or hospital.

See following pages

SPECIAL PROTECTIVE INFORMATION

Eye Protection: No special eye protection is necessary.

Skin Protection: No special skin protection is necessary.

Respiratory Protection: No special respiratory protection is normally required. However, if operating conditions create airborne concentrations which exceed the recommended exposure standard, the use of an approved respirator is recommended.

Ventilation: Use adequate ventilation to keep the airborne concentrations of this material below the recommended exposure standard.

FIRE PROTECTION

Flash Point: (COC)392°F(200°C) Min.

Autoignition Temp.: NDA

Flammability Limits: n/a

Extinguishing Media: CO_2, Dry Chemical, Foam, Water Fog

Special Fire Fighting Procedures: For fires involving this material, do not enter any enclosed or confined fire space without proper protective equipment, including self-contained breathing apparatus. See Hazardous Decomposition Products. Read the entire MSDS.

SPECIAL PRECAUTIONS

DO NOT weld, heat or drill container. Residue may ignite with explosive violence if heated sufficiently.

CAUTION! Do not use pressure to empty drum or explosion may result.

ENVIRONMENTAL PROTECTION

Environmental Impact: This material is not expected to present any environmental problems other than those associated with oil spills.

Precautions if Material is Released or Spilled: Stop the source of the leak or release. Clean up releases as soon as possible. Contain liquid to prevent further contamination of soil, surface water or groundwater. Clean up small spills using appropriate techniques such as sorbent materials or pumping. Where feasible and appropriate, remove contaminated soil. Follow prescribed procedures for reporting and responding to larger releases.

Waste Disposal Methods: Place contaminated materials in disposable containers and dispose of in a manner consistent with applicable regulations. Contact local environmental or health authorities for approved disposal of this material.

REACTIVITY DATA

Stability (Thermal, Light, etc.): Stable.

Incompatibility (Materials to Avoid): May react with strong oxidizing materials.

Hazardous Decomposition Products: Normal combustion forms carbon dioxide and water vapor and may produce oxides of sulfur and phosphorus; incomplete combustion can produce carbon monoxide.

Hazardous Polymerization: Will not occur.

PHYSICAL PROPERTIES

Solubility: Insoluble in water. Miscible with hydrocarbon solvents.

Appearance (Color, Odor, etc.): Dark green liquid

Boiling Point: n/a

Melting Point: n/a

Specific Gravity: 0.90 @ 15.6/15.6°C

Vapor Pressure: n/a

Vapor Density (Air=1): n/a

Percent Volatile (Volume %): n/a.

Evaporation: n/a

Pour Point: -26°C (Max.)

Viscosity: 15.1 cSt @ 100°C (Min.)

n/a = Not Applicable
NDA = No Data Available

Material Safety Data Sheet

CHEVRON Universal Gear Lubricant SAE 80W-90 CPS 250102

ADDITIONAL HEALTH DATA

Signs and symptoms of respiratory tract irritation may include, but may not be limited to, one or more of the following, depending on concentration and length of exposure: nasal discharge, sore throat, coughing, bronchitis, pulmonary edema and difficulty in breathing.

This product contains base oils which the International Agency for Research on Cancer (IARC) classifies as having no evidence of carcinogenic potential.

This product may contain a petroleum base oil refined by a combination of severe hydrocracking and hydrotreating. The carcinogenic potential of paraffinic base oils prepared by this process is not specifically addressed by OSHA, NTP, or IARC. However, the process conditions, chemical analyses, and the results of Ames tests all support our opinion that these oils are not carcinogenic.

MATERIAL SAFETY DATA SHEET

I. MATERIAL IDENTIFICATION

Manufacturer's Name:
Address: Telephone Number:

Material Name: Lead Scrap

II. HAZARDOUS INGREDIENTS

	CAS Number	%		OSHA 8-hr TWA	ACGIH 8-hr TWA (1984-85)	ACGIH STEL (1984-85)
Lead	(7439-92-1)	≥ 59		0.05 mg/m^3	0.15 mg/m^3	0.45 mg/m^3
Tin	(7440-31-5)	≤ 25		2 mg/m^3	2 mg/m^3	4 mg/m^3
Antimony	(7440-36-0)	≤ 24		0.5 mg/m^3	0.5 mg/m^3	--
Arsenic	(7440-38-2)	< 4		0.01 mg/m^3	0.2 mg/m^3	--
Copper	(7440-50-8)	≤ 3	(Dust) (Fume)	1 mg/m^3 0.1 mg/m^3	1 mg/m^3 0.2 mg/m^3	2 mg/m^3 --
Silver	(7440-22-4)	≤ 2		0.01 mg/m^3	0.1 mg/m^3	--
Cadmium	(7440-43-9)	< 1	(Dust) (Fume)	0.2 mg/m^3 0.1 mg/m^3	0.05 mg/m^3 0.05 mg/m^3 *	0.2 mg/m^3 --

* Ceiling Limit

Note: antimony trioxide, arsenic, and cadmium have been identified as potential human carcinogens. See Section VI, Health Hazard Data.

III. PHYSICAL DATA

Melting Point (of lead): 327° C
Specific Gravity: 9.73 - 11.36
Boiling Point (of lead): 1740° C

Vapor Pressure: 1 mm Hg @ 973° C (of lead)
Solubility in water: insoluble

Appearance: dependent on composition of scrap metal, processing method used, and existing protective coatings.

IV. FIRE AND EXPLOSION DATA

Flash Point: information not available
Autoignition Temperature: information not available
Flammability Limits: information not available

Solid, massive form of material is not combustible under ordinary fire conditions. Fire and explosion hazards are moderate when material is in the form of dust and exposed to heat or flames, chemical reaction, or contact with powerful oxidizers.

Fire Extinguishing Methods: Use special mixtures of dry chemicals. Do not use water or moist sand. Fire fighters should wear self-contained breathing apparatus and protective clothing.

V. REACTIVITY DATA

Massive material is stable at ordinary temperatures, but dust presents moderate fire and explosion hazards. Material may be incompatible with acids, bases, and oxidizers. Molten scrap metal may react violently with water. For additional information, users should consult data sheets on individual component elements.

VI. HEALTH HAZARD DATA

TLV: see Section II.
Primary Routes of Entry: ingestion of dust, inhalation of dust or fume.

Exposure to the massive form of lead scrap presents few health hazards in itself. However, normal handling of scrap may result in generation of dusts containing the component elements, and inhalation or ingestion of these dusts may present potentially significant health hazards. Thermal cutting and melting of lead scrap may produce fumes containing the component elements, and breathing these fumes may also present potentially significant health hazards. Special precautions should be taken if scrap is contaminated; see Section IX.

Prolonged inhalation of lead fumes or dusts, or ingestion of lead compounds, can result in lead poisoning. Symptoms include abdominal pain or colic, constipation, nausea, joint and muscle pains, and muscular weakness. Severe cases of overexposure may lead to central nervous system disorders, characterized by somnolence, stupor, and ultimately death.

Overexposure to tin dusts may cause irritation of the skin and mucous membranes, and may result in a benign pneumoconiosis (stannosis).

Overexposure to arsenic fumes or dusts can lead to arsenic poisoning, characterized by nausea, vomiting, and diarrhea. Prolonged overexposure can lead to liver and kidney damage, central nervous system disorders, and ultimately death. Arsenic can cause skin irritation and allergic reactions.

Overexposure to cadmium fumes or dusts may cause chest pains, shortness of breath, lung changes, and pulmonary edema, ultimately leading to death. Cadmium may also cause damage to the liver and kidneys.

Fumes of copper may cause metal fume fever with flu-like symptoms. Copper may cause skin and hair discoloration; silver may cause a greyish pigmentation of the skin, and can cause irritation of the skin and mucous membranes.

Overexposure to antimony may cause gastrointestinal upset and various nervous complaints, such as sleeplessness, irritability, and muscular pains.

Antimony trioxide, arsenic, and cadmium have been identified as potential cancer-causing agents.

FIRST AID:

Eye Contact:	Flush well with running water to remove particulate. Get medical attention.
Skin Contact:	Brush off excess dust. Wash area well with soap and water.
Inhalation:	Remove to fresh air. Get medical attention.
Ingestion:	Seek medical help if large quantities of material have been ingested. (Ingestion of significant amounts of scrap metal is unlikely.)

VII. SPILL PROCEDURES

No special precautions are necessary for spills of bulk material. If large quantities of dust are spilled, remove by vacuuming or wet sweeping to prevent heavy concentrations of airborne dust. Clean-up personnel should wear respirators and protective clothing.

Scrap metal can be reclaimed for reuse. Follow Federal, State, and Local regulations regarding disposal.

VIII. SPECIAL PROTECTION INFORMATION

Use general and local exhaust ventilation to keep airborne concentrations of dust or fume below the TLV. Employees should wear MSHA or NIOSH approved respirators for protection against airborne dust or fumes. Full protective clothing should be worn by workers exposed to heavy concentrations of dust, and showering should be required before changing into street clothes. Gloves and barrier creams may be necessary to prevent skin sensitization and dermatitis.

Approved safety glasses or goggles should be worn when working with dusty material. Safety eyewash stations should be provided in close proximity to work areas.

Pre-employment and periodic medical evaluations should be provided. Attention should be directed toward skin, eyes, respiratory tract, blood, kidneys, pulmonary function, and neurologic health. Chest X-rays should be included if symptoms are present.

Food should not be consumed in the work area.

Special attention is drawn to the requirements of the Occupational Safety and Health Administration standards for lead (29 CFR 1910.1025) and arsenic (29 CFR 1910.1018). State OSHA programs will also have similar requirements.

Special precautions should be taken if scrap is contaminated; see Section IX.

IX. SPECIAL PRECAUTIONS

Use good housekeeping practices to prevent accumulations of dust and to keep airborne dust concentrations at a minimum. Avoid breathing dust or fumes.

Store material away from incompatible materials, and keep dust away from sources of ignition.

This material is potentially contaminated with coatings, paints, and other contaminants. If the material is contaminated, special precautions (such as process control and personal protective equipment, appropriate to the nature of the suspected contaminants) should be taken to avoid resulting exposures when handling, cutting (mechanical or thermal), and/or melting.

Prepared by: Institute of Scrap Iron and Steel (ISIS)
in consultation with JRB Associates

Date Prepared: September 1985

MATERIAL SAFETY DATA SHEET

LIQUID CARBONIC
INDUSTRIAL/MEDICAL CORPORATION
135 SOUTH LA SALLE STREET • CHICAGO, ILLINOIS 60603-4282
PHONE (312) 855-2500

LIQUID OXYGEN

04/86

Emergency Phone Numbers: (312) 855-2500; CHEMTREC (800) 424-9300

SECTION I--PRODUCT IDENTIFICATION

CHEMICAL NAME: Oxygen
COMMON NAME AND SYNONYMS: Liquid Oxygen, LOX
CHEMICAL FAMILY: Oxidizer FORMULA: O_2

SECTION II--HAZARDOUS INGREDIENTS

MATERIAL	VOLUME %	CAS NO.	1985-6 ACGIH TLV UNITS
Oxygen	99.5	7782-44-7	None

SECTION III--PHYSICAL DATA

BOILING POINT (°F.)	-297°F	SPECIFIC GRAVITY (H_2O=1)	1.14 @ B.P.
VAPOR PRESSURE (mmHg.)	@-297°F-760	% VOLATILE BY VOLUME	100.0
VAPOR DENSITY (AIR=1)	1.105	EVAPORATION RATE (BUTYL ACETATE=1)	N/A
SOLUBILITY IN WATER	Slight		
APPEARANCE AND ODOR	Colorless, odorless		

SECTION IV--FIRE AND EXPLOSION HAZARD DATA

			LEL	UEL
FLASH POINT (METHOD USED)	N/A	FLAMMABLE LIMITS	N/A	N/A

EXTINGUISHING MEDIA: Large quantities of water, carbon dioxide less effective.

SPECIAL FIRE FIGHTING PROCEDURES: Remove source of oxygen which aids combustion. Keep storage equipment cool. Fight fire according to materials involved.

UNUSUAL FIRE AND EXPLOSION HAZARDS: Strong oxidizer, vigorously reacts with hydrocarbons and organic materials. Containers may rupture violently if safety devices fail to relieve pressure.

SECTION V--HEALTH HAZARD DATA

THRESHOLD LIMIT VALUE: None specified.

EFFECTS OF OVEREXPOSURE: Breathing high concentrations (over 75% by volume) causes symptoms of hyperoxia including cramps, nausea, dizziness, hypothermia, ambylopia, respiratory difficulties, fainting, convulsions, capable of leading to death.

EMERGENCY AND FIRST AID PROCEDURES: Advise physician of hyperoxia. Prompt medical attention is mandatory in cases of over-exposure. Remove to area with fresh air and assist respiration. For skin contact or frost bite, flush affected area with luke warm water. Do not use hot water. For serious cryogenic burn, see a physician immediately.
ROUTE(S) OF ENTRY: INHALATION? Yes SKIN? Yes INGESTION?
CARCINOGENICITY NTP? No IARC MONOGRAPHS? No OSHA? No

SARA TITLE III INFORMATION:

This product may contain over 1.0% propylene. This is subject to the reporting requirements of Section 313.

HAZARD CATEGORY FOR SECTION 311/312 REPORTING:

Immediate (acute) health hazard. Fire hazard. Sudden release of pressure hazard.

TSCA STATUS:

All components of this product are listed on the TSCA inventory.

SECTION XII - HANDLING AND STORAGE PRECAUTIONS

Store in an authorized location (outside, detached storage is preferred with adequate ventilation. Isolate from heat and ignition sources. Isolate from combustible materials. Provide separate storage locations for other compressed or flammable gases. Inspect cylinders frequently for leaks, dents, gouges and corrosion with emphasis on bottom of cylinder. Store cylinders in upright position or with pressure relief valves in vapor space. Do not drop or abuse cylinders. Keep container valve closed and plugged when not in use. Install protective caps when cylinders are not connected for use. Empty containers retain some residue, so they should be treated as if they were full.

The information presented herein is believed to be factual as it has been derived from the works and opinions of persons believed to be qualified experts; however, nothing contained in this information is to be taken as a warranty or representation for which the company bears legal responsibility. The user should review any recommendations in the specific context of the intended use to determine whether they are appropriate.

PREPARED BY: Regulatory Department

P.O. Box 206

Whippany, NJ 07981

ISSUED: 07/93

SUPERSEDES: 08/91

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Date Prepared: 02/10/95
Date Printed: 02/24/97
MSDS No: 0177840-006.010

PYROIL PSF-12P POWER STEERING FLUID

1. CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Material Identity
Product Name: PYROIL PSF-12P POWER STEERING FLUID
General or Generic ID: PETROLEUM HYDROCARBON

Company
The Valvoline Company
P.O. Box 14000
Lexington, KY 40512

Telephone Numbers
Emergency: 1-800-274-5263
Information: 1-606-357-7847

2. COMPOSITION/INFORMATION ON INGREDIENTS

Ingredient(s)	CAS Number	% (by weight)
PETROLEUM LUBE OIL	64742-65-0	93.0-100.0

3. HAZARDS IDENTIFICATION

Potential Health Effects

Eye
Exposure is not expected to cause eye irritation or injury.

Skin
Exposure may cause mild skin irritation. Prolonged or repeated exposure may dry the skin. Symptoms may include redness, burning, drying and cracking, and skin burns. Pre-existing skin disorders may be aggravated by exposure to this material.

Swallowing
Single dose oral toxicity is low. Swallowing small amounts during normal handling is not likely to cause harmful effects; swallowing large amounts may be harmful.

Inhalation
Exposure is possible under certain conditions of handling and use (for example, during heating, spraying, or stirring). Symptoms are more typically seen at air concentrations exceeding the recommended exposure limits.

Symptoms of Exposure
gastrointestinal irritation (nausea, vomiting, diarrhea), irritation (nose, throat, respiratory tract) (pre-existing lung disorders , e.g. asthma-like conditions, may be aggravated by exposure to this material), abdominal pain.

Target Organ Effects
No data

Developmental Information
No data

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Extinguishing Media
regular foam, carbon dioxide, dry chemical.

Fire Fighting Instructions
Water or foam may cause frothing which can be violent and possibly endanger the life of the firefighter. Wear a self-contained breathing apparatus with a full facepiece operated in the positive pressure demand mode with appropriate turn-out gear and chemical resistant personal protective equipment. Refer to the personal protective equipment section of this MSDS.

NFPA Rating
Health - 1, Flammability - 1, Reactivity - 0

6. ACCIDENTAL RELEASE MEASURES

Small Spill
Absorb liquid on vermiculite, floor absorbent or other absorbent material.

Large Spill
Prevent run-off to sewers, streams or other bodies of water. If run-off occurs, notify proper authorities as required, that a spill has occured. Persons not wearing protective equipment should be excluded from area of spill until clean-up is completed. Stop spill at source. Dike to prevent spreading. Pump to salvage tank.

7. HANDLING AND STORAGE

Handling
Containers of this material may be hazardous when emptied. Since emptied containers retain product residues (vapor, liquid, and/or solid), all hazard precautions given in the data sheet must be observed.

Storage
Not applicable

8. EXPOSURE CONTROLS/PERSONAL PROTECTION

Eye Protection
Not required under normal conditions of use. However, if misting or splashing conditions exist, then safety glasses or chemical splash goggles are advised.

Skin Protection
Not normally required. However, wear resistant gloves such as nitrile rubber to prevent irritation which may result from prolonged or repeated skin contact with product., Wear normal work clothing covering arms and legs..

Respiratory Protections
Not required under normal conditions of use. However, if oil mists are generated above recommended PEL/TLV of 5 mg/m3, then a NIOSH/MSHA approved respirator is advised in absence of proper environmental control. (Consult your industrial hygienist.)

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Viscosity
>= 7.0 cst
<= 56.0 cst

10. STABILITY AND REACTIVITY

Hazardous Polymerization
Product will not undergo hazardous polymerization.

Hazardous Decomposition
May form: carbon dioxide and carbon monoxide, oxides of sulfur, nitrogen and phosphorus, various hydrocarbons.

Chemical Stability
Stable.

Incompatibility
Avoid contact with: strong oxidizing agents.

11. TOXICOLOGICAL INFORMATION

No data

12. ECOLOGICAL INFORMATION

No data

13. DISPOSAL CONSIDERATION

Waste Management Information
Dispose of in accordance with all applicable local, state and federal regulations.

14. TRANSPORT INFORMATION

DOT Information - 49 CFR 172.101
DOT Description:
Not Regulated

Container/Mode:
CASES/SURFACE - NO EXEMPTIONS

NOS Component:
None

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k) refrigerant, R-12

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Date Prepared: 02/10/95
Date Printed: 03/11/97
MSDS No: 0016534-007.010

IGLOO REFRIGENT 12

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1. CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Material Identity
Product Name: IGLOO REFRIGENT 12
General or Generic ID: HALOGENATED HYDROCARBON

Company
The Valvoline Company
P.O. Box 14000
Lexington, KY 40512

Telephone Numbers
Emergency: 1-800-274-5263
Information: 1-606-357-7847

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2. COMPOSITION/INFORMATION ON INGREDIENTS

Ingredient(s)	CAS Number	% (by weight)
DICHLORODIFLUORO METHANE	75-71-8	100.0

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3. HAZARDS IDENTIFICATION

Potential Health Effects

Eye
Exposure causes eye irritation. Symptoms may include stinging, tearing, redness, and swelling.

Skin
Exposure may cause burns and frostbite.

Swallowing
Single dose oral toxicity is low. Swallowing small amounts during normal handling is not likely to cause harmful effects; swallowing large amounts may be harmful.

Inhalation
Exposure to vapor or mist is possible. Short-term inhalation toxicity is low. Breathing small amounts during normal handling is not likely to cause harmful effects; breathing large amounts may be harmful.

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Inhalation

If symptoms develop, immediately move individual away from exposure and into fresh air. Seek immediate medical attention; keep person warm and quiet. If person is not breathing, begin artificial respiration. If breathing is difficult, administer oxygen.

Note to Physicians

Inhalation of high concentrations of this material, as could occur in enclosed spaces or during deliberate abuse, may be associated with cardiac arrhythmias. Sympathomimetic drugs may initiate cardiac arrhythmias in persons exposed to this material.

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5. FIRE FIGHTING MEASURES

Flash Point

Not applicable

Explosive Limit

Not applicable

Autoignition Temperature

No data

Hazardous Products of Combustion

May form: carbonyl fluoride, hydrogen chloride, hydrogen fluoride phosgene.

Fire and Explosion Hazards

No special fire hazards are known to be associated with this product.

Extinguishing Media

Use an extinguishing media appropriate for surrounding fire..

Fire Fighting Instructions

Water may be used to keep fire-exposed containers cool until fire is out. Wear a self-contained breathing apparatus with a full facepiece operated in the positive pressure demand mode with appropriate turn-out gear and chemical resistant personal protective equipment. Refer to the personal protective equipment section of this MSDS.

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Respiratory Protections

If workplace exposure limit(s) of product or any component is exceeded (See Exposure Guidelines), a NIOSH/MSHA approved air supplied respirator is advised in absence of proper environmental control. OSHA regulations also permit other NIOSH/MSHA respirators (negative pressure type) under specified conditions (consult your industrial hygienist). Engineering or administrative controls should be implemented to reduce exposure.

Engineering Controls

Provide sufficient mechanical (general and/or local exhaust) ventilation to maintain exposure below TLV(s).

Exposure Guidelines

Component

DICHLORODIFLUORO METHANE (75-71-8)
OSHA VPEL 1000.000 ppm - TWA
ACGIH TLV 1000.000 ppm - TWA

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9. PHYSICAL AND CHEMICAL PROPERTIES

Boiling Point

(for product) -21.6 F (-29.7 C) @ 760.00 mmHg

Vapor Pressure

(for product) 4700.000 mmHg @ 77.00 F

Specific Vapor Density

4.300 @ AIR=1

Specific Gravity

1.315 @ 77.00 F

Liquid Density

10.950 lbs/gal @ 77.00 F
1.315 kg/l @ 25.00 C

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11. TOXICOLOGICAL INFORMATION

No data

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12. ECOLOGICAL INFORMATION

No data

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13. DISPOSAL CONSIDERATION

Waste Management Information
Return to supplier for reclamation.

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14. TRANSPORT INFORMATION

DOT Information - 49 CFR 172.101
DOT Description:
DICHLORODIFLUOROMETHANE,2.2,UN 1028

Container/Mode:
CASES/SURFACE - NO EXEMPTIONS

NOS Component:
None

RQ (Reportable Quantity) - 49 CFR 172.101

Product Quantity (lbs)	Component
5000	DICHLORODIFLUOROMETHANE

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15. REGULATORY INFORMATION

US Federal Regulations
TSCA (Toxic Substances Control Act) Status
TSCA (UNITED STATES) The intentional ingredients of this product are listed.

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MATERIAL SAFETY DATA SHEET

The Valvoline Company

Date Prepared: 02/10/95
Date Printed: 02/24/97
MSDS No: 0254990-002.010

PYROIL SUVA TRANS A/C 30LB CYLINDER

1. CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Material Identity
Product Name: PYROIL SUVA TRANS A/C 30LB CYLINDER (R-134A)
General or Generic ID: HALOGENATED HYDROCARBON

Company
The Valvoline Company
P.O. Box 14000
Lexington, KY 40512

Telephone Numbers
Emergency: 1-800-274-5263
Information: 1-606-357-7847

2. COMPOSITION/INFORMATION ON INGREDIENTS

Ingredient(s)	CAS Number	% (by weight)
ETHANE, 1,1,1,2-TETRAFLUORO	811-97-2	100.0

3. HAZARDS IDENTIFICATION

Potential Health Effects

Eye
Exposure causes eye irritation. Symptoms may include stinging, tearing, redness, and swelling.

Skin
Exposure may cause burns and frostbite.

Swallowing
Single dose oral toxicity is low. Swallowing small amounts during normal handling is not likely to cause harmful effects; swallowing large amounts may be harmful.

Inhalation
Exposure to vapor or mist is possible. Short-term inhalation toxicity is low. Breathing small amounts during normal handling is not likely to cause harmful effects; breathing large amounts may be harmful.

Symptoms of Exposure
gastrointestinal irritation (nausea, vomiting, diarrhea), irritation (nose, throat, respiratory tract) (pre-existing lung disorders , e.g. asthma-like conditions, may be aggravated by exposure to this material), central nervous system depression (dizziness, drowsiness, weakness, fatigue, nausea, headache, unconsciousness), and death.

Target Organ Effects
No data

Developmental Information
No data

Continued On Next Page

Fire and Explosion Hazards
HFC-134A is not flammable at ambient temperatures and atmospheric pressure. However, HFC-134A has been shown in tests to be combustible at pressures as low as 5.5 psig (at 177 C (350.6 F)) when mixed with air at concentrations of generally more than 60 volume % air. At lower temperatures, higher pressures are required for combustibility.

Extinguishing Media
water fog.

Fire Fighting Instructions
Water may be used to keep fire-exposed containers cool until fire is out. Wear a self-contained breathing apparatus with a full facepiece operated in the positive pressure demand mode with appropriate turn-out gear and chemical resistant personal protective equipment. Refer to the personal protective equipment section of this MSDS.

NFPA Rating
Health - 1, Flammability - 0, Reactivity - 1

6. ACCIDENTAL RELEASE MEASURES

Small Spill
Allow to evaporate. Ventilate area.

Large Spill
Allow to evaporate. Persons not wearing protective equipment should be excluded from area until leak has been repaired.

7. HANDLING AND STORAGE

Handling
Containers of this material may be hazardous when emptied. Since emptied containers retain product residues (vapor, liquid, and/or solid), all hazard precautions given in the data sheet must be observed.

Storage
Not applicable

8. EXPOSURE CONTROLS/PERSONAL PROTECTION

Eye Protection
Chemical splash goggles in compliance with OSHA regulations are advised; however, OSHA regulations also permit other type safety glasses. Consult your safety representative.

Skin Protection
Wear resistant gloves such as: polyvinyl alcohol, Wear normal work clothing covering arms and legs..

Continued On Next Page

Odor
No data

pH
Not applicable

10. STABILITY AND REACTIVITY

Hazardous Polymerization
Product will not undergo hazardous polymerization.

Hazardous Decomposition
May form: carbonyl fluoride, hydrogen fluoride.

Chemical Stability
Stable.

Incompatibility
Avoid contact with: alkali metals, powdered metals.

11. TOXICOLOGICAL INFORMATION

No data

12. ECOLOGICAL INFORMATION

No data

13. DISPOSAL CONSIDERATION

Waste Management Information
Return to supplier for reclamation.

14. TRANSPORT INFORMATION

DOT Information - 49 CFR 172.101
DOT Description:
1,1,1,2-TETRAFLUOROETHANE,2.2,UN 3159

Container/Mode:
CASES/SURFACE - NO EXEMPTIONS

NOS Component:
None

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MATERIAL SAFETY DATA SHEET

Material Name
Quaker State Dexron III/Mercon Automatic Transmission Fluid

Issue Date: 11/10/1994
MSDS No.: QS-040

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Chemical Name: Petroleum Hydrocarbon
Internal Part No.: 406348 (12x1 qt); 06308 (5 gallon); 06309 (16 gallon); 06310 (55 gallon); 06319 (bulk)
Product Use:

Manufacturer Information
Quaker State Corporation
225 E. John Carpenter Freeway
Irving, Texas 75062
----PHONE #: (800)562-5928
EMERGENCY #: (214)868-0416
Mfg. Part #NA

Supplier Information
None
Sup. Part #NA

Synonyms: Automatic Transmission Fluid

Section 2 - COMPOSITION / INFORMATION ON INGREDIENTS

CAS #	Components	% Vol
64742-65-0	Petroleum Distillates, Solvent Dewaxed Heavy Paraffinic	75-95
84605-20-9	Polyolefin alkene amine	1-5
1809-14-9	Alkyl phosphite	<1
68910-26-4	Polymer of styrene & maleic dialkyl esters	1-5
72162-26-6	Olefin sulfide	<1

Component Information/Information on Non-Hazardous Components
This product is not considered a hazardous product under 29 CFR 1910.1200 (Hazard Communication). All mineral oils used in this product have been severely hydrotreated and/or solvent refined.

Section 3 - HAZARDS IDENTIFICATION

Emergency Overview
This product is a red liquid. Hazardous combustion products may include carbon monoxide, carbon dioxide, and oxides of boron and phosphorus. Containers of this material may be hazardous when emptied due to remaining residues. Observe all hazard precautions.
Label Information
WARNING: Never use welding or cutting torch on or near container

Continued on next page...

General Fire Hazards
KEEP AWAY FROM ALL SOURCES OF IGNITION. Product, or even residue can ignite explosively with sufficient ignition source. Toxic fumes, gases or vapors may evolve on burning. Vapors may be heavier than air and may travel along the ground to a distant ignition source and flash back. Container may rupture on heating.

Hazardous Combustion Products
Carbon dioxide, carbon monoxide, and oxides of boron and phosphorus.

Extinguishing Media
Use any media suitable for fire excluding water. Regular foam, carbon dioxide, or dry chemical are preferred.

Fire Fighting Equipment/Instructions
Wear self-contained breathing apparatus with a full facepiece operated in the positive pressure demand mode when fighting fires. Water or foam may cause frothing, which can be violent.

NFPA Ratings: Health: 1 Fire: 1 Reactivity: 0 Other:

HMIS Ratings: Health: 1 Fire: 1 Reactivity: 0
Personal Protection: goggles and gloves

Section 6 - ACCIDENTAL RELEASE MEASURES

Containment Procedures
Stop the flow of material, if this is without risk. Dike the spilled material, where this is possible.

Clean-Up Procedures
For small spills, absorb liquid on vermiculate or other absorbent. For large spills stop spill at the source. Pump or vacuum transfer spilled product to clean containers for recovery, recycle and/or reuse. Use personal protective equipment. Ventilate spill area. Prevent entry into sewers and waterways.

Evacuation Procedures
Isolate area. Keep unnecessary personnel away.

Special Instructions
Eliminate all ignition sources including flares, flames and electrical sparks.

Section 7 - HANDLING AND STORAGE

Procedures for Handling
Keep away from potential sources of ignition. Open container in a well ventilated area. Avoid breathing vapors. Use a NIOSH-approved respirator if exposed to oil mist, and adequate ventilation is not available. Wash thoroughly after handling.

Recommended Storage Methods
Eliminate all sources of ignition. Keep this material in a cool,

Continued on next page...

Incompatibility
Strong oxidizing agents (peroxides, chlorine, strong acids).
Hazardous Decomposition Products
Carbon dioxide, carbon monoxide, smoke, aldehydes, various oxides including boron and phosphorus, and other hydrocarbons.
Hazardous Polymerization
Will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

Acute Toxicity/Target Organ Information
A. General Product/Component Information
No data available for product as a whole.
B. Component LD50/LC50
Epidemiology
No data available for product as a whole.
Carcinogenicity
A. General Product/Component Information
No data available for product as a whole. The main component, a petroleum fraction (64742-65-0), has been found to be inactive for causing cancer in laboratory animals.
B. Component Carcinogenicity Listings
None of this product's components are listed by ACGIH, IARC, NIOSH, NTP or OSHA.
Teratogenicity/Reproductive Effects
No data available for product as a whole.
Neurotoxicity
No data available for product as a whole. Excessive exposure to the oil mist and vapors may cause respiratory tract irritation and central nervous system depression.
Mutagenicity
No data available for product as a whole.
Other Information
Persons with skin or respiratory conditions may be more sensitive to product.

Section 12 - ECOLOGICAL INFORMATION

Ecotoxicity
No information is available on ecotoxicity of this product. Keep product out of sewers and waterways.
Environmental Fate
No information is available.

Section 13 - DISPOSAL CONSIDERATIONS

US EPA Waste Number & Descriptions

Continued on next page...

Section 16 - OTHER INFORMATION

Other Information

This information is, to the best of Quaker State Corporation's knowledge and belief, accurate and reliable. However, no representation, warranty, or guarantee is made to its accuracy, reliability, or completeness. It is the user's responsibility to satisfy himself as to the suitableness and completeness of such information for his own particular use.

Preparation Information: last revision 11/10/94

Key/Legend

NA = Not Applicable; ND = Not Determined; Y = Yes; N = No

Contact Person: Vince Bernard, Phone: (214)868-0416
Corporate Safety Director

End of MSDS #QS-040 Print Date: 08/02/1996

COAST WELDING SUPPLY -- ACETYLENE (GAS)
MATERIAL SAFETY DATA SHEET
FSC: 6830
NIIN: 00N012372
Manufacturer's CAGE: 9F058
Part No. Indicator: A
Part Number/Trade Name: ACETYLENE (GAS)

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General Information

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Company's Name: COAST WELDING SUPPLY
Company's Street: 916 W BETTERAVIA
Company's City: SANTA MARIA
Company's State: CA
Company's Country: US
Company's Zip Code: 93455-7014
Company's Emerg Ph #: 805-928-3621
Company's Info Ph #: 805-928-3621
Record No. For Safety Entry: 001
Tot Safety Entries This Stk#: 001
Status: SMJ
Date MSDS Prepared: 27NOV85
Safety Data Review Date: 16JAN91
MSDS Serial Number: BJSCC

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Ingredients/Identity Information

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Proprietary: NO
Ingredient: ACETYLENE
Ingredient Sequence Number: 01
NIOSH (RTECS) Number: AO9600000
CAS Number: 74-86-2
OSHA PEL: NOT ESTABLISHED
ACGIH TLV: ASPHYXIANT; 9192
Other Recommended Limit: NIOSH REL 2500 PPM

Proprietary: NO
Ingredient: SUP DAT:DEVELOP.CYLS EXPOS TO EXTREME HEAT IN FIRE SITUATION MAY RUPTURE VIOLENTLY IF CYLS ARE NOT KEPT COOL. (ING 3)
Ingredient Sequence Number: 02
NIOSH (RTECS) Number: 9999999ZZ

Proprietary: NO
Ingredient: ACETYLENE IS LIGHTER THAN AIR & CAN ACCUMULATE IN TOP OF ENCLOSED SPACES. POTNTL EXPLO HAZ FROM RE-IGNIT.
Ingredient Sequence Number: 03
NIOSH (RTECS) Number: 9999999ZZ

Proprietary: NO
Ingredient: MTLS TO AVOID:EXPLOS WHEN IGNITED W/OXYGEN,CHLORINE OR FLUORINE.HAZ DECOMP PRODS:INTO CARBON & HYDROGEN)GIVEN A (ING 5)
Ingredient Sequence Number: 04
NIOSH (RTECS) Number: 9999999ZZ

Proprietary: NO
Ingredient: SOURCE OF IGN.HNDLG/STOR PREC:CYLS IN UPRIGHT POSITION.FOLLOW GEN SAFETY PROC FOR HNDLG COMPRESSED GAS CYLS FOUND(ING 6)
Ingredient Sequence Number: 05
NIOSH (RTECS) Number: 9999999ZZ

Proprietary: NO
Ingredient: IN CGA PAMPHLET P-1.OTHER PREC:PACKED W/POROUS FILLER MATL. LEAK CHECK W/SOAPY WTR,NEVER USE FLAME.REFER TO NFPA (ING 7)

Explanation Carcinogenicity: NOT RELEVANT
Signs/Symptoms Of Overexp: SEE HEALTH HAZARDS.
Med Cond Aggravated By Exp: NONE SPECIFIED BY MANUFACTURER.
Emergency/First Aid Proc: ELIMINATE ALL POSSIBLE SOURCES OF IGNITION. INHAL:MOVE TO FRESH AIR. ASSISTED RESPIRATION & SUPPLEMENTAL OXYGEN SHOULD BE GIVEN IF NOT BREATHING. RESCUE PERSONNEL MAY REQUIRE NIOSH/MSHA APPROVED SCBA.

Precautions for Safe Handling and Use

Steps If Matl Released/Spill: EVACUATE IMMED AREA. ELIMINATE ANY POSS IGNIT SOURCE & PROVIDE MAXIMUM EXPLO-PROOF VENT. SHUT OFF SOURCE OF ACETYLENE IF POSS. ISOLATE ANY LEAKING CYLINDER & CONTACT SUPPLIER.
Neutralizing Agent: NONE SPECIFIED BY MANUFACTURER.
Waste Disposal Method: IF PRACTICAL, MOVE CYLINDER TO SAFE OUTSIDE AREA AWAY FROM ANY SOURCE OF IGNITION. ALLOW CYLINDER TO DISCHARGE SLOWLY INTO ATMOSPHERE & CONTACT SUPPLIER. DISPOSE I/A/W FEDERAL, STATE AND LOCAL REGULATIONS (FP N).
Precautions-Handling/Storing: STORE IN COOL, WELL-VENT PLACE AWAY FROM OPEN FLAMES & OTHER IGNIT SOURCES. DO NOT STORE WITHIN 20 FT OF O*2 OR OTHER OXIDIZERS. STORE (SEE INGRED 5)
Other Precautions: NEVER USE COPPER PIPING FOR ACETYLENE SERVICE, ONLY STEEL OR WROUGHT IRON PIPE SHOULD BE USED. DO NOT OPEN CYL VALVES MORE THAN 1/2 TURN. NEVER USE IN EXCESS OF 15 PSIG PRESS. CYLS ARE HVR THAN OTHER CYLS BECAUSE THEY ARE (SEE INGRED 6)

Control Measures

Respiratory Protection: NONE (MFR). USE NIOSH/MSHA APPROVED RESPIRATOR APPROPRIATE FOR EXPOSURE OF CONCERN (FP N).
Ventilation: NATURAL/MECH WHERE GAS PRESENT. LOCAL EXHST SUFFICIENT TO KEEP AREA BELOW 2 1/2% ACETYLENE CONC. EXPLO PROOF MECH VENT.
Protective Gloves: NOT APPLICABLE
Eye Protection: CHEMICAL WORKERS GOGGLES (FP N).
Other Protective Equipment: NONE
Work Hygienic Practices: WASH HANDS THOROUGHLY AFTER USE AND BEFORE EATING, SMOKING OR USING SANITARY FACILITIES (FP N).
Suppl. Safety & Health Data: FIRE FIGHT PROC:PERSONNEL/BLDG STRUCTURE IS NOT IN DANGER. IF FLAME EXTING & ACETYLENE CONTINUES TO ESCAPE, EXPLO RE-IGNIT COULD OCCUR. FOLLOW INSTRUCTIONS FOUND IN CGA SAFETY BULLETIN #4 "HNDLG ACETYLENE CYLS IN FIRE SITUATIONS." WEAR NIOSH/MSHA APPRVD SCBA & FULL PROT EQUIP (FP N). EXPLO HAZ:15' COULD (SEE INGRED 2)

Transportation Data

Trans Data Review Date: 91093
DOT PSN Code: ADR
DOT Proper Shipping Name: ACETYLENE, DISSOLVED
DOT Class: 2.1
DOT ID Number: UN1001
DOT Label: FLAMMABLE GAS
IMO PSN Code: AFB
IMO Proper Shipping Name: ACETYLENE,DISSOLVED
IMO Regulations Page Number: 2101
IMO UN Number: 1001
IMO UN Class: 2(2.1)
IMO Subsidiary Risk Label: -
IATA PSN Code: AFJ
IATA UN ID Number: 1001
IATA Proper Shipping Name: ACETYLENE, DISSOLVED
IATA UN Class: 2.1
IATA Label: FLAMMABLE GAS
AFI PSN Code: AFJ
AFI Symbols: T

MATERIAL SAFETY DATA SHEET

LIQUID CARBONIC
INDUSTRIAL/MEDICAL CORPORATION
135 SOUTH LA SALLE STREET, CHICAGO, ILLINOIS 60603-4282
PHONE: (312) 855-2500

Acetylene

April 1986

Emergency Phone Numbers: (312) 855-2500; CHEMTREC (800) 424-9300

SECTION I—PRODUCT IDENTIFICATION

CHEMICAL NAME:	Acetylene
COMMON NAME AND SYNONYMS:	Acetylene, Ethyne, Ethine
CHEMICAL FAMILY:	Alkynes

FORMULA: C_2H_2

SECTION II--HAZARDOUS INGREDIENTS

MATERIAL	VOLUME %	CAS NO.	1985-6 ACGIH TLV UNITS
Acetylene	100%	74-86-2	Simple asphyxiant-No TLV

SECTION III—PHYSICAL DATA

BOILING POINT (°F.)	-112°F	SPECIFIC GRAVITY (H_2O=1)	0.613 @ B. P.
VAPOR PRESSURE (mmHg.)	@ -112°F 760	% VOLATILE BY VOLUME	100%
VAPOR DENSITY (AIR=1)	32°F 0.907	EVAPORATION RATE (BUTYL ACETATE=1)	Rapid
SOLUBILITY IN WATER	Slight		
APPEARANCE AND ODOR	Colorless with garlic like odor		

SECTION IV—FIRE AND EXPLOSION HAZARD DATA

FLASH POINT (METHOD USED) -18°C (C.C.)
FLAMMABLE LIMITS % BY VOLUME IN AIR LEL 2.5 UEL 81
EXTINGUISHING MEDIA: Carbon dioxide, dry chemical, Halon, water

SPECIAL FIRE FIGHTING PROCEDURES: Stop gas flow and fight fire conventionally. Fire fighters should be cognizant of extreme fire and explosion hazards and fight fire from safe distance. Keep containers cool with water spray. Use self contained breathing apparatus. Fires which have been extinguished without stopping flow of gas can easily re-ignite or explode.

UNUSUAL FIRE AND EXPLOSION HAZARDS: Acetylene decomposes above 15 psig pressure if undissolved in acetone. Cylinder safety fuse melts at 212°F and will release gas. Acetylene can decompose violently when heated or shocked. Ref: CGA bulletin SB-4 "Handling Acetylene Cylinders in Fire Situations."

SECTION V—HEALTH HAZARD DATA

THRESHOLD LIMIT VALUE: No TLV Established - Workplace air must have over 18% O_2 by volume at atmospheric pressure.

EFFECTS OF OVEREXPOSURE: Headaches, dizziness, shortness of breath, unconsciousness, death. Symptoms of anoxia only occur when gas is in flammable range and has not ignited.

EMERGENCY AND FIRST AID PROCEDURES: Remove to fresh air. Do not enter areas within the flammability range (over 2.5%) because of immediate fire and explosion hazard. Use an explosimeter for acetylene to measure concentration in air. Stop gas supply if possible and keep containers cool with water spray. Gas has an anesthetic action. Pure Acetylene can be inhaled in high concentrations without chronic harmful affects. Acetylene is a simple asphyxiant which can displace oxygen in the air to asphyxiating levels. If inhaled give oxygen, or if unconscious give artificial respiration. Obtain prompt medical assistance. Keep warm and at rest.

ROUTE(S) OF ENTRY: INHALATION? Yes SKIN? INGESTION?
CARCINOGENICITY: NTP? No IARC MONOGRAPHS? No OSHA? No

SECTION VI—REACTIVITY DATA

STABILITY: UNSTABLE (X) STABLE ( )
CONDITIONS TO AVOID: Undissolved gas dissociates above 15 psig. Can decompose violently when heated or shocked without oxygen or air.
INCOMPATABILITY (MATERIALS TO AVOID): Oxidizers, halogens, copper, silver, mercury
HAZARDOUS DECOMPOSITION PRODUCTS: Carbon and hydrogen
HAZARDOUS POLYMERIZATION: MAY OCCUR ( ) WON'T OCCUR (X)
CONDITIONS TO AVOID: N/A

SECTION VII—SPILL OR LEAK PROCEDURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED: Evacuate all personnel from affected area. Use appropriate protective equipment. Eliminate ignition sources. Shut off flow of gas if possible. Provide maximum explosion proof ventiliation.

WASTE DISPOSAL METHOD: Move cylinders to a remote outdoor area. Burn off gas or allow to slowly diffuse into atmosphere. Follow Federal, state, or local disposal regulations.

SECTION VIII—SPECIAL PROTECTION INFORMATION

RESPIRATORY PROTECTION: Self-contained breathing apparatus

VENTILATION: LOCAL EXHAUST (X) Provide local ventilation to keep acetylene concentration in air below 2500 ppm.
MECHANICAL (GENERAL) (X) Forced ventilation to prevent acetylene concentration from reaching up to flammable range.

PROTECTIVE GLOVES: Leather EYE PROTECTION: Safety goggles
OTHER PROTECTIVE EQUIPMENT: Safety shoes, acetylene monitor and alarm

SECTION IX—SPECIAL PRECAUTIONS

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING: Protect cylinders from physical damage. Store in cool, dry, and well ventilated area. Electrical equipment should be explosion proof and non-sparking. All lines and equipment should be electrically grounded. Post "No Smoking or Open Flame" signs in storage and use areas. Store away from oxidizer and corrosive gases. Store cylinders in upright position, secured to prevent falling over. There should be no sources of ignition in storage or use area. Use a check valve or trap in cylinder discharge to prevent hazardous back-flow.

OTHER PRECAUTIONS: To avoid hazardous acetylene dissociation, do not allow the free gas to exceed 15 psig pressure @ 70°F. Follow withdrawal rate maximum so that solvent is not withdrawn with gas. Use only DOT or ASME coded containers. Container must not be recharged except by or with consent of Liquid Carbonic. Reference: CGA Bulletins SB-2 "Oxygen Deficient Atmospheres," SB-4 "Handling Acetylene Cylinders in Fire Situations"; CGA Pamphlets G-1 "Acetylene" and P-1 "Safe Handling of Compressed Gases in Containers."

PETROLANE MATERIAL SAFETY DATA SHEET

P.O. Drawer 1410 - 1600 E. Hill St., Long Beach, CA 90801
Contact: Safety Department - Telephone: (213) 427-5471

February 1989

WARNING STATEMENT

DANGER! Extremely Flammable. Keep away from heat, sparks and open flame. Vapor reduces oxygen available for breathing and may cause suffocation in confined spaces. Use only with adequate ventilation. Odor may not provide adequate warning of potentially hazardous concentrations. Vapor is heavier than air and collects in low levels. Liquid may cause freeze burn similar to frostbite.

I. Product Identification

Product Name: Petrolane Propane
Chemical Name: Propane
Synonyms: LP-Gas, Bottled Gas
Chemical Family: Paraffinic Hydrocarbon
Chemical Formula: C_3H_8
DOT Proper Shipping Name: Liquefied Petroleum Gas
DOT Hazard Class: Flammable Gas
DOT I.D. Number: UN1075

Transportation Emergency Telephone:
800-424-9300 (CHEMTREC)

NFPA Classification:

Health	1	Slightly Toxic
Fire	4	Extremely Flammable
Reactivity	0	Stable

II. Hazardous Ingredients

Component	CAS Number	%	OSHA PEL	ACGIH TLV
Ethane	74-84-0	0-6	None established	Simple asphyxiant
Propane	74-98-6	87-97	1000 ppm (8hr)	Simple asphyxiant
Propylene	115-07-1	0-5	None established	Simple asphyxiant
Butane	106-97-8	0-2.5	None established	800 ppm (8 hr)

III. Physical Data

Boiling Point: -44°F
Melting Point: -309°F
Vapor Pressure: 208 psig (max.) @ 100°F
Vapor Density (Air=1): 1.5
Specific Gravity (H_2O=1): 0.504
% Volatile by Volume: 100%
Solubility in Water: Insoluble
Evaporation Rate(Bu Ac=1): N/A
Gas Volume @ Atm. Pressure & 60°F (Cu. ft. gas/gal. liquid): 36.4
Appearance and Odor: Colorless, odorless in pure form. Propane contains a foul smelling, skunk-like warning agent(odorant). The odorant is effective, in most instances, but not everyone can smell the odor. The ability of people to detect odors varies widely. Also, certain chemical reactions with material in the propane system can reduce the propane odor level. No odorant will be 100% effective in all circumstances. If odor level appears to be weak, notify propane supplier immediately.

IV. Fire and Explosion Data

Flash Point (Method Used): -156°F (estimated)
Flammable Limits (% Volume in Air): Lower 2.1% Upper 9.5%

Extinguishing Media: Dry chemical, foam or CO_2 for small fires. Stop flow of gas first.

Special Fire Fighting Procedures and Precautions: Elimimate sources of ignition. Evacuate area. Notify fire department. Ailow only trained, properly protected personnel in area. Shut off source of gas, if possible. Allow fire to burn itself out after gas flow is shut off. High volume water supply can be used to cool heat-exposed pressure containers and nearby equipment. Approach a flame enveloped container from the side, never the head ends. Use extreme caution when applying water to a container which has been exposed to heat or flame for more than a short time. Shock of cool water on hot metal could cause container rupture. For uncontrollable fires and when flame is impinging on container, withdraw all personnel and evacuate surrounding vicinity immediately.

Unusual Fire and Explosion Hazards: Products of combustion may yield carbon monoxide, a toxic gas. Uncontrolled vapors spread rapidly, are heavier than air and are extremely flammable.

V. Reactivity Data

Stability: Stable Conditions to Avoid: High heat, sparks, open flame
Materials to Avoid: Strong oxidizing agents
Hazardous Decomposition Products: Incomplete combustion can cause carbon monoxide, a toxic gas.
Hazardous Polymerization: Will not occur Conditions to Avoid: None

VI. Health Hazard Data

Product is not listed as carcinogenic by NTP, IARC or OSHA. Product may contain a trace, but detectable amount of benzene, a chemical listed by the State of California and known to cause cancer or reproductive toxicity.

Routes of Entry / Acute Effects of Overexposure:

Inhalation: Exposure to high concentrations of the vapor causes dizziness, drowsiness, nausea or unconsciousness due to anesthetic properties.

Skin Contact: Liquid can cause freeze burns similar to frostbite if contact with skin occurs. No skin absorption is expected.

Eye Contact: Liquid can cause freeze burns if contact with eyes occurs.

Ingestion: Ingestion is not expected to occur in normal use.

Chronic Effects of Overexposure: No abnormal reactions reported following exposure to 1000 ppm for 8 hours per day, 5 days per week, for 2 weeks.

Medical Conditions Generally Aggravated by Exposure: Persons with chronic respiratory diseases should avoid exposure.

VII. Emergency and First Aid Procedures

Eye Contact: Flush with water. Obtain medical assistance if contact with liquid has occurred.

Skin Contact: If freeze burn occurs, remove contaminated clothes, shoes and jewelry. Immerse burned area in warm (not hot) water. Keep immersed. Call for medical assistance.

Inhalation: Remove victim from further exposure and into fresh air. Provide oxygen if breathing is labored. If victim is unconscious, seek immediate medical attention. If breathing has stopped, give artificial respiration.

Ingestion: Not expected to occur in normal use.

VIII. Spill or Leak Procedures

Product is extremely flammable. Vapor is heavier than air and may collect at lower levels. Flammable concentrations may be present below nose level. If there is a leak but no fire, do not light the escaped gas. Eliminate all ignition sources. Do not smoke, use a nearby phone or actuate electrical switches. Evacuate the area. If possible, remove leaking container to safe area. Stop flow of gas or allow vapor to disperse in a safe area. Water spray can be used to help dilute vapor concentration in air.

Dispose of gas only by controlled burning in compliance with local laws and regulations.

IX. Handling and Storage Precautions

Store in an authorized location (outside, detached storage is preferred) with adequate ventilation. Keep away from heat and ignition sources. Inspect cylinders frequently for leaks, dents, gouges and corrosion with emphasis on bottom of cylinder. Store cylinders in upright position or with pressure relief valves in vapor space. Do not drop or abuse cylinders. Keep container valve closed and plugged when not in use. Install protective caps when cylinders are not connected for use. Empty containers retain some residue; so they should be treated as if they are full.

X. Personal Protection Information

Ventilation: Use adequate ventilation to maintain exposures below recommended limits.

Respiratory Protection: Use a NIOSH-approved respirator if area is thought to contain unknown concentration of gas.

Eye Protection: Use safety goggles or safety glasses with side shields.

Protective Clothing: No special garments are necessary, but avoid skin contact with liquid because of possibility of freeze burn. Propane resistant gloves are recommended.

XI. Communication with Employees and Purchasers

This Material Safety Data Sheet (MSDS) alerts the reader to the potential safety and health hazards of propane. It also contains valuable reference material relating to the safe use and handling of the product. Make sure that this information is shared with all employees and purchasers who use or handle the product. It is an important part of the OSHA hazard communication program.

o) welding, propane

AIR PRODUCTS & CHEMICALS -- PROPANE
MATERIAL SAFETY DATA SHEET
FSC: 6810
NIIN: 00F037664
Manufacturer's CAGE: 00742
Part No. Indicator: A
Part Number/Trade Name: PROPANE

General Information

Company's Name: AIR PRODUCTS AND CHEMICALS INC
Company's Street: 7201 HAMILTON BLVD
Company's City: ALLENTOWN
Company's State: PA
Company's Country: US
Company's Zip Code: 18195-1501
Company's Emerg Ph #: 215-481-4911/800-523-9374
Company's Info Ph #: 800-322-9092/800-523-9374
Record No. For Safety Entry: 001
Tot Safety Entries This Stk#: 001
Status: SE
Date MSDS Prepared: 01JUN90
Safety Data Review Date: 15DEC94
Preparer's Company: AIR PRODUCTS AND CHEMICALS INC
Preparer's St Or P. O. Box: 7201 HAMILTON BLVD
Preparer's City: ALLENTOWN
Preparer's State: PA
Preparer's Zip Code: 18195-1501
MSDS Serial Number: BWJPX

Ingredients/Identity Information

Proprietary: NO
Ingredient: PROPANE
Ingredient Sequence Number: 01
NIOSH (RTECS) Number: TX2275000
CAS Number: 74-98-6
OSHA PEL: 1000 PPM
ACGIH TLV: SIMPLE ASPHYXIANT
Other Recommended Limit: 1800 MG/CUM

Physical/Chemical Characteristics

Appearance And Odor: COLORLESS ODORIZED GAS W/SICKENING SWEET SMELL
Boiling Point: -43.8F
Melting Point: -305.9F
Vapor Pressure (MM Hg/70 F): 147 PSIA
Vapor Density (Air=1): 0.117
Specific Gravity: 1.56
Solubility In Water: 6.5% BY VOLUME

Fire and Explosion Hazard Data

Flash Point: -156F
Lower Explosive Limit: 2.1
Upper Explosive Limit: 9.5
Extinguishing Media: DRY CHEMICAL, CO2, HALON
Special Fire Fighting Proc: RESCUE PERSONNEL SHOULD AVOID EXPOSURE/WEAR SCBA. DON'T ENTER AREAS W/IN FLAMMABLE RANGE DUE TO IMMEDIATE FIRE & EXPLOSION HAZARD. COOL CONTAINERS W/WATER SPRAY
Unusual Fire And Expl Hazrds: PROPANE GAS VAPORS ARE DENSE/CAN COLLECT & REMAIN IN LOW SPOTS EVEN AFTER THE SOURCE OF GAS HAS BEEN ELIMINATED. CONTAINERS CAN RUPTURE VIOLENTLY DUE TO FIRE.

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Transportation Data

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Disposal Data

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Label Data

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Label Required: YES
Label Status: G
Common Name: PROPANE
Special Hazard Precautions: INHALATION: EXPOSURE TO PROPANE DEPENDING ON CONCENTRATION & DURATION OF EXPOSURE MAY INCLUDE RAPID RESPIRATION, AIR HUNGER, DEATH. SKIN: MAY CAUSE FROSTBITE. INCOORDINATION, FATIGUE, NAUSEA, VOMITING, CONVULSIONS, LOSS OF CONSCIOUSNESS, SKIN COLOR CHANGED TO GRAY/WHITE, COLD FEELING, NUMBNESS.
Label Name: AIR PRODUCTS AND CHEMICALS INC
Label Street: 7201 HAMILTON BLVD
Label City: ALLENTOWN
Label State: PA
Label Zip Code: 18195-1501
Label Country: US
Label Emergency Number: 215-481-4911/800-523-9374

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URL for this msds http://hazard.com. If you wish to change, add to, or delete information in this archive please sent updates to dan@hazard.com.

Exhibit 7

California Integrated Waste Management Board

Linda Moulton-Patterson, Chair
1001 I Street • Sacramento, California 95814
Mailing Address: P. O. Box 4025, Sacramento, CA 95812-4025
www.ciwmb.ca.gov

Gray Davis
Governor

Winston H. Hickox
Secretary for Environmental Protection

AAdlen Brothers Auto Wrecking
11590 Tux ford Street
Sun Valley, CA 91352

RE: TIRE PROGRAM IDENTIFICATION NUMBER

Dear ***AAdlen Brothers Auto Wrecking*:**

You recently requested a Tire Program Identification (TPID) number from the California Integrated Waste Management Board (CIWMB) for use with the Waste Tire Manifest System. Listed below is your assigned TPID number.

TPID No. 1289207-01

This TPID number is being assigned to your business at the following location:

AAdlen Brothers Auto Wrecking
11590 Tux ford Street
Sun Valley, CA 91352

When to use your TPID:

- The TPID number should be used by you when generating or accepting used or waste tires for delivery at your location.
- The TPID number is required to be entered on Part II of the Used and Waste Tire Manifest Form.

Facts about your TPID number:

- The TPID is a 7-digit number followed by a 2-digit number = 1234567-01
- The first 7-digits represent the unique number assigned to your business.
- The last 2-digits relate to a specific address and site where waste tires are generated, stored or delivered/disposed.

STATE OF CALIFORNIA—ENVIRONMENTAL P ECTION AGENCY
PETE WILSON, Go
DEPARTMENT OF TOXIC SUBSTANCES CONTROL
400 P Street, 4th Floor
P.O. Box 806
Sacramento, CA 95812-0806

Date: 2-15-94

Aadlen Bro. Auto Wrecking
11590 Tuxford St
Sun Valley, CA 92384

EPA ID #: CAL 000115618
Location Address:
"Same"

PERMANENT RECORD - DO NOT DESTROY
CALIFORNIA EPA IDENTIFICATION NUMBER

This is to acknowledge that a permanent California Environmental Protection Agency Identification (EPA ID) Number has been assigned to your place of business. (Please note EPA ID Number above the location address.)

An EPA ID Number is site specific. It is only valid for the location to which it was assigned. If you stop handling hazardous waste, move your place of business, or change ownership you must notify the Department of Toxic Substances Control.

This EPA ID Number must be used for all manifesting, recordkeeping, and reporting requirements. Please retain this notice in your files.

Department of Toxic Substances Control
Office of Information Management
Manifest Unit
Telephone: (916) 324-1781

State of California
State Water Resources Control Board

NOTICE OF INTENT

TO COMPLY WITH THE TERMS OF THE
GENERAL PERMIT TO DISCHARGE STORM WATER
ASSOCIATED WITH INDUSTRIAL ACTIVITY (WQ ORDER No. 97-03-DWQ)
(Excluding Construction Activities)

SECTION I. NOI STATUS (please check only one box)

A. [ ] New Permittee B. [✓] Change of Information WDID # 4 1 1 9 5 0 1 0 6 8 0

SECTION II. FACILITY OPERATOR INFORMATION (See instructions)

A. NAME: THE ADLEN FAMILY LP DBA ADLEN BROTHERS WRECKING

Phone: 818 - 504 - 1093

Mailing Address: 11590 TUXFORD ST

City: SUN VALLEY State: CA Zip Code: 91352

Contact Person: TERRY MARTINEZ

B. OPERATOR TYPE: (*check one*) 1.[✓] Private 2.[ ]City 3.[ ]County 4.[ ]State 5.[ ]Federal 6.[ ]Special District 7.[ ]Gov. Combo

SECTION III. FACILITY SITE INFORMATION

FACILITY NAME: ADLEN BROTHERS AUTO WRECKING

Phone: 818 - 504 - 1173

Facility Location: 11590 TUXFORD ST

County: LOS ANGELES

City: SUN VALLEY State: CA Zip Code: 91352

B. MAILING ADDRESS:

City: State: Zip Code:

Contact Person: TERRY MARTINEZ

C. FACILITY INFORMATION
Total Size of Site: 216 (check one) Acres [✓] Sq. Ft. [ ]

Percent of Site Impervious (*including rooftops*): 100 %

D. SIC CODE(S) OF REGULATED ACTIVITY:
1. 5015
2.
3.

E. REGULATED ACTIVITY (*describe each SIC code*):
USED MOTOR VEHICLE PARTS

SECTION IV. ADDRESS FOR CORRESPONDENCE

[ ] Facility Operator Address [✓] Facility Mailing Address [ ] Both

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996

ANNUAL REPORT

FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

Reporting Period July 1, 1995 through June 30, 1996

An annual report is required to be submitted to your local regional Water Quality Control Board (Regional Board) by July 1 of each year. This document must be certified and signed, under penalty of perjury, by the appropriate official of your company. Many of the Annual Report questions require an explanation. Please provide explanations on a separate sheet as an attachment. **Retain a copy of the completed Annual Report for your records.**

If you have any questions contained in items A, B, and C below differs from the information provided in your Notice of Intent (NOI), circle or highlight the information that differs from tour NOI.

If you have any questions, please contact your Regional Board Storm Water Program contact. The address of the Regional Board (where the Annual Report must be filed) along with the name and Telephone number of the contact is indicated on page 13 of this Annual Report. To find your Regional Board information, match the first digit of your WDID number with the corresponding number that appears in parentheses on the second line of each Regional Board office listed on Page 13.

GENERAL INFORMATION:

A. Facility WDID No: 4B19S010680 L A

B. Owner/Operator:

Name: ADDLEN BROS. AUTO. WRECKING Contact Person: MILT HOFFMON

Mailing Address: 11590 TUXFORD Title:

City SUN VALLEY State: CA ZIP: 91352 Phone: (818) 504-1091

C. Facility/Site Information:

Facility/Name: ADDLEN BROS. AUTO. WRECKING Mailing Address: 11590 TUXFORD

City: SUN VALLEY State: CA ZIP: 91352 Phone: (818) 504-1091

Contact Person: MILT HOFFMON

Standard Industrial Classification (SIC) Code(S): 5093 SCRAP & WASTE MATERIALS

Ragulated Activity: AUTO DISMANTLER

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996

ANNUAL REPORT

FOR

STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

SPECIFIC INFORMATION

STORM WATER POLLUTION PREVENTION PLAN

1. Have you developed (and updated) a Storm Water Pollution Prevention Plan (SWPPP), as required in Section A of the General Permit?

   X Yes ___ No If No, attach an explanation and time schedule for SWPPP development.

2. Have you implemented all elements of your SWPPP?

   X Yes ___ No If No, attach an explanation and time schedule for SWPPP implementation.

NON-STORM WATER DISCHARGES

3. Section A.6 of the General Permit requires that non-storm water discharges be eliminated or permitted.

   a. Does your facility have any non-storm water discharges (see page 7 for examples)?

      X No Go to Question 4.

      ___ Yes Please list: _____

      _____

   b. Have any of the non-storm water discharges been permitted by a State or local agency?

      X No ___ Yes If yes, on a separate sheet, identify the non-storm water discharge, agency that permitted the non-storm water discharge, and the permit number.

   c. Attach a description for each non-storm water discharges listed in 3.a that has <u>not</u> been permitted. At a minimum, this description should answer the following:

      - What is the source of the non-storm water discharge?
      - What are the characteristics of the non-storm water discharge (odor, color, frequency, flow rate, potential pollutants, etc.)?
      - What areas of your facility does the non-storm water discharge contact?
      - Has the non-storm water discharge been previously reported to the Regional Board?
      - Why hasn't the non-storm water discharge been eliminated?
      - When is the non-storm water discharge scheduled to be eliminated?

   d. Does your SWPPP include Best Management Practices (BMPs) that address the non-storm water discharges described in 3.c?

      ___ Yes ___ No If No, revise your SWPPP and attach a brief description of the revisions.

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996

ANNUAL REPORT

FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

SAMPLING AND ANALYSIS

7. a. Is your facility part of a Group Monitoring Plan? (Only facilities that have received prior approval are part of a group monitoring plan.)

___Yes X No

If No, go to Question 8.
If Yes, answer the following questions:

b. What is the Group Monitoring Plan's name? _____

c. Is your facility designated to collect storm water samples?

___Yes ___No

If Yes, go to Question 9.
If No, go to Question 10.

8. a. Is your facility exempt from sample collection (Section B.9 of the General Permit)? (Only facilities that have received prior Self-certification approval are exempt from sampling. Facilities participating in a Group Monitoring Plan cannot be self-certified)

___Yes X No

If No, go to Question 9.

b. If Yes, which of the following apply (check one):

___ Submitted Self Certification to Regional Board. Date Submitted:_____
___ Received certification of local agency.
___ Received exemption by the Regional Board.

Attach, as appropriate, the first page of either the submitted self certification, the local agency certification letter, or the Regional Board exemption letter.

9. Section B.5.d of the General Permit requires that storm water samples from at least two storms be collected and analyzed.

a. How many storms did you sample? 1

If you did not sample any storms, or only sampled one storm, attach an explanation.

b. How many storm water discharge points are located at your facility? 2

Did you sample from every discharge point?

X Yes ___No

If you did not sample from every discharge point, attach an explanation why you did not or attach a justification as to why certain discharge points are substantially identical.

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996

ANNUAL REPORT

FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

STORM WATER POLLUTION PREVENTION PLAN EVALUATION

10. Based upon the comparison and analysis of analytical data, visual observations, etc. from the time you submitted your Notice of Intent to comply with the General Permit; is your Storm Water Pollution Prevention Plan effective in reducing pollutants in your facility's storm water discharge? Discuss specific areas or elements of the SWPPP that are not effective or need improvement. Provide a brief description of alternatives or proposed revisions to the SWPPP.

11. Provide a written evaluation of your monitoring program in detecting pollutants in storm water discharge. Discuss areas of the monitoring program that are not effective or need improvement. Provide a brief description of proposed revisions to the monitoring program.

12. The General Industrial Activities Storm Water Permit requires that:

    - a Storm Water Pollution Prevention Plan be developed and implemented (Questions 1 and 2)
    - non-storm water discharges be eliminated, reported to the Regional Board, or permitted (Question 3)
    - an annual site inspection be conducted to determine the effectiveness of BMPs in reducing and/or eliminating sources of storm water pollution (Question 4)
    - two dry weather visual observations be conducted (Question 5)
    - wet weather visual observations be made once each month during the wet season (Question 6)
    - unless specifically exempted, samples be collected and analyzed from at least two storms (Question 9)

    If you have not completed <u>all</u> of the above requirements, please make sure you have attached an explanation for each requirement you have not completed.

    Do you certify, based on your annual site inspection that, your facility is in compliance with the requirements of the General Industrial Activities Storm Water Permit?

    X Yes ____ No

13. Attach an updated site map showing the areas of industrial activity; the areas where visual inspections were done; all storm water discharge locations; and all storm water sampling locations.

CERTIFICATION

I am duly authorized to sign reports required by the GENERAL INDUSTRIAL ACTIVITIES STORM WATER PERMIT (see Provisions C.9) and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: Dan Griffiths

Signature: Dan Griffith Date: 5-15-96

Title: SWPPP Supervisor

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996

ANNUAL REPORT

FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 1 - ANNUAL SITE INSPECTION FORM

Inspection Date: May 7, 1996

INSPECTED AREAS List all areas where pollutants may come in contact with storm water (i.e. exposed loading /unloading, access storage, manufacturing or process actives occur, maintenance activities, ect.).	**For each area, are the BMPs listed in the SWPPP in place?**		**Are additional BMPs needed to control storm water pollution?**		**DESCRIBE DEFICIENCIES AND CORRECTIVE ACTIONS**
	YES	**NO**	**YES**	**NO**	
Yard	☒	☐	☐	☒	None needed at this time
Driveway to Tijunga	☒	☐	☐	☒	none needed at this time
Driveway to penrose	☒	☐	☐	☒	None needed at this time

Inspector's Name: Dan Griffiths

Title: SWPPP SUPERVISOR

Signature: Dan Griffiths

Date: May 10, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996

ANNUAL REPORT

FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 2 - RECORD OF DRY SEASON VISUAL OBSERVATIONS

- Dry season visual observation are used to detect the presence of non-storm water discharges.
- This form should be filled out for at least two dry season visual observations between May 1 and September 30 of each year.
- Non-storm water discharges that have not been eliminated must be reported in Item 3 (page 2) of the Annual Report.

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVED?	DESCRIBE OBSERVATIONS	DESCRIBE SOURCE OF DISCHARGE
Drive way to Tijunga	July 17 1995 / 12:30 pm	YES ☐ NO ☒ INDICATIONS OF PRIOR DISCHARGES? YES ☐ NO ☒	The Ground was dry and clear of any Materials.	N/A

Comments/Corrective Actions Taken for above: None Needed at this time

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVED?	DESCRIBE OBSERVATIONS	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	July 17 1995 / 12:30 pm	YES ☐ NO ☒ INDICATIONS OF PRIOR DISCHARGES? YES ☐ NO ☒	The Ground was dry and clear of any Materials.	N/A

Comments/Corrective Actions Taken for above: None Needed at this time

Inspector's Name: Dan Griffiths

Title: SWPPP SUPERVISOR

Signature: Dan Griffiths

Date: July 18, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

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FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 2 - RECORD OF DRY SEASON VISUAL OBSERVATIONS

- Dry season visual observation are used to detect the presence of non-storm water discharges.
- This form should be filled out for at least two dry season visual observations between May 1 and September 30 of each year.
- Non-storm water discharges that have not been eliminated must be reported in Item 3 (page 2) of the Annual Report.

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVED?	DESCRIBE OBSERVATIONS	DESCRIBE SOURCE OF DISCHARGE
Driveway to Tijunga	Sept 4, 1996 10:30am	YES ☐ NO ☒	The ground was dry and clear of any materials	N/A
		INDICATIONS OF PRIOR DISCHARGES? YES ☐ NO ☒		

Comments/Corrective Actions Taken for above: None needed at this time.

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVED?	DESCRIBE OBSERVATIONS	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	Sept 4, 1996	YES ☐ NO ☒	The ground was dry and clear of any materials	N/A
		INDICATIONS OF PRIOR DISCHARGES? YES ☐ NO ☒		

Comments/Corrective Actions Taken for above: None needed at this time.

Inspector's Name: Dan Griffiths Title: SWPPP Supervisor

Signature: Dan Griffiths Date: September 5, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996
ANNUAL REPORT
FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharges for at least one storm per month between October and April 30.

Month: October

Approximate time storm water discharge began: N/A

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Tijunga	Oct. 31, 1996 11:00am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	N/A	N/A

Comments/Corrective Actions Taken for above: None needed at this time.

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	Oct. 31, 1996 11:00am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	N/A	N/A

Comments/Corrective Actions Taken for above: None needed at this time.

Inspector's Name: Dan Griffiths

Title: SWPPP Supervisor

Signature: Dan Griffiths

Date: October 31, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996

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FOR

STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharges for at least one storm per month between October and April 30.

Month: November

Approximate time storm water discharge began: N/A

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Tijunga	Nov. 26, 1996 10:00am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	N/A	N/A

Comments/Corrective Actions Taken for above: NONE NEEDED AT THIS TIME.

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	Nov. 26 1996 10:00am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	N/A	N/A

Comments/Corrective Actions Taken for above: NONE NEEDED AT THIS TIME

Inspector's Name: Dan Griffiths

Title: SWPPP Supervisor

Signature: Dan Griffiths

Date: November 27, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

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FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharges for at least one storm per month between October and April 30.

Month: December

Approximate time storm water discharge began: N/A

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Tijunga	Dec. 31, 1996 2:30am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	N/A	N/A

Comments/Corrective Actions Taken for above: NONE NEEDED AT THIS TIME

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	Dec. 31, 1996 2:30am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	N/A	N/A

Comments/Corrective Actions Taken for above: NONE NEEDED AT THIS TIME

Inspector's Name: Dan Griffiths

Title: SWPPP Supervisor

Signature: Dan Griffiths

Date: December 31, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

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FOR

STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharges for at least one storm per month between October and April 30.

Month: January

Approximate time storm water discharge began: 10:00am

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Tijunga	Jan. 31, 1996	Floating Materials? ☒ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☒	THE DISCHARGE IS WAS HEAVY WITH SOME CLOUDINESS.	RAIN RUNOFF FROM THE YARD AND PARKING LOT

Comments/Corrective Actions Taken for above: NO CHANGES ARE NEEDED AT THIS TIME.

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	Jan. 31, 1996	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	THE DISCHARGE IS WAS HEAVY WITH SOME CLOUDINESS.	RAIN RUNOFF FROM THE YARD AND PARKING LOT

Comments/Corrective Actions Taken for above: NO CHANGES ARE NEEDED AT THIS TIME

Inspector's Name: Dan Griffiths

Title: SWPPP Supervisor

Signature: Dan Griffiths

Date: FEBRUARY 15, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

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FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharges for at least one storm per month between October and April 30.

Month: February

Approximate time storm water discharge began: 8:00am

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Tijunga	Feb. 20, 1996 9:00am	Floating Materials? ☒ Suspended materials ? ☒ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☒	THE DISCHARGE IS WAS HEAVY WITH SOME CLOUDINESS.	RAIN RUNOFF FROM THE YARD AND PARKING LOT

Comments/Corrective Actions Taken for above: NO CHANGES ARE NEEDED AT THIS TIME

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	Feb. 20, 1996 9:00am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	THE DISCHARGE IS WAS HEAVY WITH SOME CLOUDINESS.	RAIN RUNOFF FROM THE YARD AND PARKING LOT

Comments/Corrective Actions Taken for above: NO CHANGES ARE NEEDED AT THIS TIME

Inspector's Name: Dan Griffiths

Title: SWPPP Supervisor

Signature: Dan Griffiths

Date: February 22, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

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FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharges for at least one storm per month between October and April 30.

Month: March

Approximate time storm water discharge began: 2:00pm

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Tijunga	March 4, 1996 2:00pm	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	THE DISCHARGE IS WAS HEAVY WITH SOME CLOUDINESS.	RAIN RUNOFF FROM THE YARD AND PARKING LOT

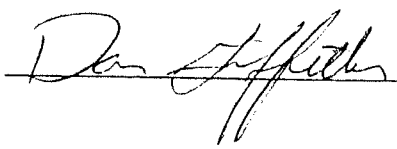
Comments/Corrective Actions Taken for above: NO CHANGES ARE NEEDED AT THIS TIME

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	March 4, 1996 2:00pm	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	THE DISCHARGE IS WAS HEAVY WITH SOME CLOUDINESS.	RAIN RUNOFF FROM THE YARD AND PARKING LOT

Comments/Corrective Actions Taken for above: NO CHANGES ARE NEEDED AT THIS TIME

Inspector's Name: Dan Griffiths

Title: SWPPP Supervisor

Signature: 

Date: March 14, 1996

State of Califomia
STATE WATER RESOURCES CONTROL BOARD

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FOR

STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharges for at least one storm per month between October and April 30.

Month: April

Approximate time storm water discharge began: N?A

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Tijunga	April 30, 1996 3:00am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	N/A	N/A

Comments/Corrective Actions Taken for above: NONE NEEDED AT THIS TIME

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATION	DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
Driveway to Penrose	April 30, 1996 3:00am	Floating Materials? ☐ Suspended materials ? ☐ Odors? ☐ Oil/grease sheen? ☐ Discoloration's? ☐ Cloudiness? ☐	N/A	N/A

Comments/Corrective Actions Taken for above: NONE NEEDED AT THIS TIME.

Inspector's Name: Dan Griffiths

Title: SWPPP Supervisor

Signature: Dan Griffiths

Date: April 30, 1996

State of California
STATE WATER RESOURCES CONTROL BOARD

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FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 4 - SAMPLING RESULTS

DISCHARGE POINT: Driveway (1) to Tijunga

DATE AND TIME OF SAMPLE: 2/26/96 TIME DISCHARGE STARTED: AM

CONSTITUENT TESTED	TESTED BY: LAB/SELF[1]	RESULTS[2][3]	TEST METHOD USED[4]	DETECTION LIMIT
pH	LAB	5.75(pH units)	EPA 150.1	-
TOTAL SUSPENDED SOLIDS	LAB	32mg/l	EPA 160.2	1
SPECIFIC CONDUCTANCE	LAB	21.6umho/cm	EPA 120.1	-
OIL & GREASE	LAB	NDmg/l	EPA 413.1	1
TOTAL ORGANIC CARBON	LAB	mg/l		
ADDITIONAL POLLUTANTS:				
Pb	LAB	ND mg/L	EPA 239.1	0.1
FLOW [5]	HEAVY	gallons		
SIZE OF STORM (IF AVAILABLE)		inches		

(1) If testing was done by a certified laboratory, indicate "lab"; otherwise, indicate "self"

(2) If analytical results indicate a value less then the detection limit (or non detect), show the value as less than the numerical value of the detection limit.

(3) If you did now analyze for a particular constituent, do not report "o". Instead leave the appropriate box blank.

(4) Indicate the test method used to determine the result. In cases where analysis was conducted in the field using portable analyzers (portable pH meters, portable EC meters, ect.), indicate wit an "A".

(5) Discharges subject to the Santa Clara County General Permit are required to provide estimates of calculations of the volume of storm water discharged from each point. Describe, on a separate sheet, how the flow measurements was calculated.

Name of person collecting sample: DAN GRIFFITHS Title: SWPPP Supervisor

If analysis conducted by certified laboratory, enter name of lab: WECK LABORATORIES, INC.

State of California
STATE WATER RESOURCES CONTROL BOARD

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FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 4 - SAMPLING RESULTS

DISCHARGE POINT: Driveway (2) to Penrose

DATE AND TIME OF SAMPLE: 2/26/96 TIME DISCHARGE STARTED: AM

CONSTITUENT TESTED	TESTED BY: LAB/SELF[1]	RESULTS[2X3]	TEST METHOD USED[4]	DETECTION LIMIT
pH	LAB	5.9(pH units)	EPA 150.1	-
TOTAL SUSPENDED SOLIDS	LAB	5mg/l	EPA 160.2	1
SPECIFIC CONDUCTANCE	LAB	26.5umho/cm	EPA 120.1	-
OIL & GREASE	LAB	NDmg/l	EPA 413.1	1
TOTAL ORGANIC CARBON	LAB	mg/l		
ADDITIONAL POLLUTANTS:				
Pb	LAB	0.12	EPA 239.1	0.1
FLOW [5]	HEAVY	gallons		
SIZE OF STORM (IF AVAILABLE)		inches		

(1) If testing was done by a certified laboratory, indicate "lab"; otherwise, indicate "self"
(2) If analytical results indicate a value less then the detection limit (or non detect), show the value as less than the numerical value of the detection limit.
(3) If you did now analyze for a particular constituent, do not report "o". Instead leave the appropriate box blank.
(4) Indicate the test method used to determine the result. In cases where analysis was conducted in the field using portable analyzers (portable pH meters, portable EC meters, ect.), indicate wit an "A".
(5) Discharges subject to the Santa Clara County General Permit are required to provide estimates of calculations of the volume of storm water discharged from each point. Describe, on a separate sheet, how the flow measurements was calculated.

Name of person collecting sample: DAN GRIFFITHS Title: SWPPP Supervisor

If analysis conducted by certified laboratory, enter name of lab: WECK LABORATORIES, INC.

Weck Laboratories, Inc.
Analytical & Environmental Services

Client: Cast Metals Services
2117 Foothill Blvd., Suite D
La Verne, CA 91750

Report Date: May 08, 1996

Received Date: May 01, 1996
Wednesday 12:14/TGN

Attn.: Dan Griffiths (909) 392-9656 x FAX (909) 392-9881

Project Name: S.W.P.P.P.
Purchase Order #: Normal Turnaround **Project #:**

Certificate of Analysis

Lab#: 9609049 **Sample ID:** Addlen Drive 1 **Matrix:** Storm Water
Sampled By: **Date:** 02/26/1996 **Time:**

Parameter	Result	Units	MDL	Method	Analyzed	Run #
pH	5.75	Units		EPA 150.1	05/01/1996	96068978
Total Suspended Solids	32	mg/L	1	EPA 160.2	05/02/1996	96069081
Specific Conductance	21.6	umhos/cm		EPA 120.1	05/02/1996	96068986
Oil & Grease, Total	ND	mg/L	1	EPA 413.1	05/03/1996	96069067
Lead	ND	mg/L	0.1	EPA 239.1	05/03/1996	96069051

Lab#: 9609050 **Sample ID:** Addlen Drive 2 **Matrix:** Storm Water
Sampled By: **Date:** 02/26/1996 **Time:**

Parameter	Result	Units	MDL	Method	Analyzed	Run #
pH	5.9	Units		EPA 150.1	05/01/1996	96068978
Total Suspended Solids	5	mg/L	1	EPA 160.2	05/02/1996	96069081
Specific Conductance	26.5	umhos/cm		EPA 120.1	05/02/1996	96068986
Oil & Grease, Total	ND	mg/L	1	EPA 413.1	05/03/1996	96069067
Lead	0.12	mg/L	0.1	EPA 239.1	05/03/1996	96069051

ND = Not Detected
MDL = Method Detection Limit

Authorized Signature

Any remaining sample(s) for testing will be disposed of three weeks from the final report date unless other arrangements are made in advance.

REFERENCE QUESTION 9-A

Storm events occurred at intervals not compatible with State guide lines for collection or occurred at times that did not correspond to trained collectors' work schedule or the business schedule, in general. Where possible, additional collectors will be trained.

State of California
STATE WATER RESOURCES CONTROL BOARD

COPY

1998-1999
ANNUAL REPORT
FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

Reporting Period July 1, 1998 through June 30, 1999

An annual report is required to be submitted to your local Regional Water Quality Control Board (Regional Board) by July 1 of each year. This document must be certified and signed, under penalty of perjury, by the appropriate official of your company. Many of the Annual Report questions require an explanation. Please provide explanations on a separate sheet as an attachment. **Retain a copy of the completed Annual Report for your records.**

If any information contained in Items A, B, and C below is incorrect, please cross out or highlight the incorrect information (do not white out or erase) and provide the correct information next to or above the incorrect information.

If you have any questions, please contact your Regional Board Storm Water Program Contact. The address of the Regional Board (where the Annual Report must be filed) along with the name and telephone number of the contact is indicated below.

REGIONAL BOARD INFORMATION:

LOS ANGELES REGIONAL WATER BOARD
101 CENTRE PLAZA DR.
MONTEREY PARK, CA 91754-2156

DAN RADULESCU
(323) 266-7630

GENERAL INFORMATION

A. Facility WDID No:

4 19S010680

B. Facility Operator Information:

Contact Person:
MILT HOFFMAN
(818) 504-1091

AADLEN BROS. AUTO WRECKING
11590 TUXFORD STREET
SUN VALLEY, CA 91352

C. Facility Information:

Contact Person:
MILT HOFFMAN
(818) 504-1091

AADLEN BROS. AUTO WRECKING
11590 TUXFORD
SUN VALLEY, CA 91352

SIC Code(s):
5015 Motor Vehicle Parts, Used

4. For each storm event sampled, did you collect and analyze a sample from each of the facilitys' storm water discharge locations? ☐ YES, go to Item E.6 ☐ NO

5. Was sample collection or analysis reduced in accordance with Section B.7.d of the General Permit? ☐ YES ☐ NO, **attach explanation**

   If "YES", **attach documentation** supporting your determination that two or more drainage areas are substantially identical.

   Date facility's drainage areas were last evaluated __/__/__

6. Were all samples collected during the first hour of discharge? ☐ YES ☐ NO, **attach explanation**

7. Was all storm water sampling preceded by three (3) working days without a storm water discharge? ☐ YES ☐ NO, **attach explanation**

8. Were there any discharges of stormwater that had been temporarily stored or contained? (such as from a pond) ☐ YES ☐ NO, go to Item E.10

9. Did you collect and analyze samples of temporarily stored or contained storm water discharges from two storm events? (or one storm event if you checked item D.2.i or iii. above) ☐ YES ☐ NO, **attach explanation**

10. Section B.5. of the General Permit requires you to analyze storm water samples for pH, Total Suspended Solids (TSS), Specific Conductance (SC), Total Organic Carbon (TOC) or Oil and Grease (O&G), other pollutants likely to be present in storm water discharges in significant quantities, and analytical parameters listed in Table D of the General Permit.

    a. Is your facility required to analyze additional parameters listed in Table D of the General Permit? ☐ YES ☐ NO, Go to Item E.11

    b. Did you analyze all storm water samples for the applicable parameters listed in Table D? ☐ YES ☐ NO

    c. If you did not analyze all storm water samples for the applicable Table D parameters, check one of the following reasons:

    _____ The parameter has not been detected in significant quantities from the last two consecutive sampling events. **Attach explanation**

    _____ The parameter is not likely to be present in storm water discharges and authorized non-storm water discharges in significant quantities based upon the facility operator's evaluation. **Attach explanation**

    _____ Other. **Attach explanation**

11. For each storm event sampled, attach a copy of the laboratory analytical reports and report the sampling and analysis results using **Form 1** or its equivalent. The following must be provided for each sample collected:

- Date and time of sample collection
- Name and title of sampler.
- Parameters tested.
- Name of analytical testing laboratory.
- Discharge location identification.
- Testing results.
- Test methods used.
- Test detection limits.
- Date of testing.
- Copies of the laboratory analytical results.

G. MONTHLY WET SEASON VISUAL OBSERVATIONS

Section B.4.a of the General Permit requires you to conduct monthly visual observations of storm water discharges at all storm water discharge locations during the wet season. These observations shall occur during the first hour of discharge or, in the case of temporarily stored or contained storm water, at the time of discharge.

1. Indicate below whether monthly visual observations of storm water discharges occurred at all discharge locations. **Attach an explanation for any "NO" answers.**

	YES	NO		YES	NO
October	☐	☒ Dry	February	☒	☐
November	☐	☒ Dry	March	☒	☐
December	☒	☐	April	☒	☐
January	☐	☒ Not During 8 Hrs	May	☐	☒ Dry

2. Report monthly wet season visual observations using **Form 4** or provide the following information.

   a. date, time, and location of observation
   b. name and title of observer
   c. characteristics of the discharge (i.e., odor, color, etc.) and source of any pollutants observed.
   d. any new or revised BMPs necessary to reduce or prevent pollutants in storm water discharges. Provide new or revised BMP implementation date.

ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION (ACSCE)

H. ACSCE CHECKLIST

Section A.9 of the General Permit requires the facility operator to conduct one ACSCE in each reporting period (July 1-June 30). Evaluations must be conducted within 8-16 months of each other. The SWPPP and monitoring program shall be revised and implemented, as necessary, within 90 days of the evaluation. The checklist below includes the minimum steps necessary to complete a ACSCE. Indicate whether you have performed each step below. **Attach an explanation for any "NO" answers.**

1. Have you inspected all potential pollutant sources and industrial activities areas? ☒ YES ☐ NO
   The following areas should be inspected:

   - areas where spills and leaks have occured during the last year.
   - outdoor wash and rinse areas.
   - process/manufacturing areas.
   - loading, unloading, and transfer areas.
   - waste storage/disposal areas.
   - dust/particulate generating areas.
   - erosion areas.
   - building repair, remodeling, and construction
   - material storage areas
   - vehicle/equipment storage areas
   - truck parking and access areas
   - rooftop equipment areas
   - vehicle fueling/maintenance areas
   - non-storm water discharge generating areas

2. Have you reviewed your SWPPP to assure that its BMPs address existing potential pollutant sources and industrial activities areas? ☒ YES ☐ NO

3. Have you inspected the entire facility to verify that the SWPPP's site map, is up-to-date? The following site map items should be verified: ☒ YES ☐ NO

   - facility boundaries
   - outline of all storm water drainage areas
   - areas impacted by run-on
   - storm water discharges locations
   - storm water collection and conveyance system
   - structural control measures such as catch basins, berms, containment areas, oil/water separators, etc.

ATTACHMENT SUMMARY

Answer the questions below to help you determine what should be attached to this annual report. Answer NA (Not Applicable) to questions 2-4 if you are not required to provide those attachments.

1. Have you attached Forms 1,2,3,4, and 5 or their equivalent?	☒ YES (Mandatory)		
2. If you conducted sampling and analysis, have you attached the laboratory analytical reports?	☐ YES	☐ NO	☒ NA
3. If you checked box II, III, IV, or V in item D.2 of this Annual Report, have you attached the first page of the appropriate certifications?	☐ YES	☐ NO	☒ NA
4. Have you attached an explanation for each "NO" answer in items E.1, E.2, E.5-E.7, E.9, E.10.c, F.1.b, F.2.a, F.2.c, G.1, H.1-H.7, or J?	☒ YES	☐ NO	☐ NA

ANNUAL REPORT CERTIFICATION

I am duly authorized to sign reports required by the INDUSTRIAL ACTIVITIES STORM WATER GENERAL PERMIT (see Standard Provision C.9) and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: MILT HOFFMAN

Signature: [signature] Date: 6/1/99

Title: OWNER

N/A

SIDE A

1998-99

ANNUAL REPORT
FORM 1-SAMPLING & ANALYSIS RESULTS

FIRST STORM EVENT

- If analytical results are less than the detection limit (or non detectable), show the value as less than the numerical value of the detection limit (example: <.05)
- If you did not analyze for a required parameter, do not report "0". Instead, leave the appropriate box blank
- When analysis is done using portable analysis (such as portable pH meters, SC meters, etc.), indicate "PA" in the appropriate test method used box.
- Make additional copies of this form as necessary.

NAME OF PERSON COLLECTING SAMPLE(S): _____ TITLE: _____ SIGNATURE: _____

DESCRIBE DISCHARGE LOCATION Example: NW Out Fall	DATE/TIME OF SAMPLE COLLECTION	TIME DISCHARGE STARTED	ANALYTICAL RESULTS For First Storm Event									
			BASIC PARAMETERS					OTHER PARAMETERS				
			pH	TSS	SC	O&G	TOC					
	__/__/__ ☐AM ☐PM	☐AM ☐PM										
	__/__/__ ☐AM ☐PM	☐AM ☐PM										
	__/__/__ ☐AM ☐PM	☐AM ☐PM										
	__/__/__ ☐AM ☐PM	☐AM ☐PM										
TEST REPORTING UNITS:			pH Units	mg/l	umho/cm	mg/l	mg/l					
TEST METHOD DETECTION LIMIT:												
TEST METHOD USED:												
ANALYZED BY (SELF/LAB):												

TSS - Total Suspended Solids SC - Specific Conductance O&G - Oil & Grease TOC - Total Organic Carbon

N/A

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ANNUAL REPORT

FORM 2-QUARTERLY VISUAL OBSERVATIONS OF AUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

- Quarterly dry weather visual observations are required of each authorized NSWD.
- Observe each authorized NSWD source, impacted drainage area, and discharge location.
- Authorized NSWDs must meet the conditions provided in Section D (pages 5-6), of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ YES ☒ NO If **YES**, complete reverse side of this form.
QUARTER: **OCT.-DEC.** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ YES ☒ NO If **YES**, complete reverse side of this form.
QUARTER: **JAN.-MARCH** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ YES ☒ NO If **YES**, complete reverse side of this form.
QUARTER: **APRIL-JUNE** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ YES ☒ NO If **YES**, complete reverse side of this form.

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ANNUAL REPORT

FORM 3-QUARTERLY VISUAL OBSERVATIONS OF UNAUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

- Unauthorized NSWDs are discharges (such as wash or rinse waters) that do not meet the conditions provided in Section D (pages 5-6) of the General Permit.
- Quarterly visual observations are required to observe current and detect prior unauthorized NSWDs.
- Quarterly visual observations are required during dry weather and at all facility drainage areas.
- Each unauthorized NSWD source, impacted drainage area, and discharge location must be identified and observed.
- Unauthorized NSWDs that can not be eliminated within 90 days of observation must be reported to the Regional Board in accordance with Section A.10.e of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** **DATE/TIME OF OBSERVATIONS** 9/2/98 __:__ ☐ AM ☒ PM	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	**If YES** to either question, complete reverse side.
QUARTER: **OCT.-DEC.** **DATE/TIME OF OBSERVATIONS** 12/8/98 __:__ ☒ AM ☐ PM	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	**If YES** to either question, complete reverse side.
QUARTER: **JAN.-MARCH** **DATE/TIME OF OBSERVATIONS** 1/6/99 __:__ ☐ AM ☒ PM	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	**If YES** to either question, complete reverse side.
QUARTER: **APRIL-JUNE** **DATE/TIME OF OBSERVATIONS** 5/5/99 __:__ ☒ AM ☐ PM	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	**If YES** to either question, complete reverse side.

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FORM 4-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.

Observation Date: October ____ 1998 Dry

Observers Name: _____

Title: _____

Signature: Jerry Dean

Drainage Location Description	#1	#2	#3	#4
Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

Observation Date: November____ 1998 Dry

Observers Name: _____

Title: _____

Signature: Jerry Dean

Drainage Location Description	#1	#2	#3	#4
Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

Observation Date: December__/__ 1998

Observers Name: _____

Title: _____

Signature: Jerry Dean

Drainage Location Description	#1 S Gate	#2	#3	#4
Observation Time	1 : 15 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Time Discharge Began	1 : 00 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

Observation Date: January____ 1999
Not During Bus Hrs

Observers Name: _____

Title _____

Signature: Jerry Dean

Drainage Location Description	#1	#2	#3	#4
Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

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FORM 4 (Continued)-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.

		#1	#2	#3	#4
Observation Date: February 9 1999 Observers Name: Title: Signature: Jerry Adams	Drainage Location Description	S Gate			
	Observation Time	12: ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	11:30 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: March 15 1999 Observers Name: Title: Signature: Jerry Adams	Drainage Location Description	#1 S. Gate	#2	#3	#4
	Observation Time	9:00 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	8:45 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: April 6 1999 Observers Name: Title Signature: Jerry Adams	Drainage Location Description	#1 S. Gate	#2	#3	#4
	Observation Time	8:45 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	8:30 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: May ____ 1999 Dry Observers Name: Title Signature: Jerry Adams	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

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FORM 5-ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY BMP STATUS

EVALUATION DATE: 6 / 1 / 99 INSPECTOR NAME: MILT HOFFMAN TITLE: OWNER SIGNATURE: Milt Hoffman

POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)			If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP Implementation	Describe additional/revised BMPs or corrective actions and their date(s) of Implementation
HAZARDOUS WASTE STORAGE AREA	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐ YES ☒ NO			
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐ YES ☒ NO			
DISASSEMBLY AREA	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐ YES ☒ NO			
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐ YES ☒ NO			
VEHICLE STORAGE ARE	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐ YES ☒ NO			
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐ YES ☒ NO			
OUTSIDE PARTS STORAGE AREA	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐ YES ☒ NO			
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐ YES ☒ NO			

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD

1999-2000 ANNUAL REPORT

FOR STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITIES

COPY

Reporting Period July 1, 1999 through June 30, 2000

An Annual Report is required to be submitted to your local Regional Water Quality Control Board (Regional Board) by July 1 of each year. This document must be certified and signed, under penalty of perjury, by the appropriate official of your company. Many of the Annual Report questions require an explanation. Please provide explanations on a separate sheet as an attachment. **Retain a copy of the completed Annual Report for your records.**

If any information contained in Items A, B, C, and D below is incorrect, please cross out or highlight the incorrect information (do not white out or erase) and provide the correct information next to or above the incorrect information so that we can update our records. Please remember that a Notice of Termination and new Notice of Intent is required whenever your facility is relocated or changes ownership.

If you have any questions, please contact your Regional Board Storm Water Program Contact. The address of the Regional Board (where the Annual Report must be filed) along with the name, telephone number, and e-mail address of the contact is indicated below. Additional copies of the Annual Report may be obtained from our web site at **www.swrcb.ca.gov.**

REGIONAL BOARD INFORMATION:

LOS ANGELES REGIONAL WATER BOARD
320 W. 4TH STREET, SUITE 200
LOS ANGELES, CA 90013

ROBERT TOM
(213) 576-6753
E-mail: rtom@rb4.swrcb.ca.gov

GENERAL INFORMATION

A. Facility Location:

AADLEN BROS. AUTO WRECKING
11590 TUXFORD
SUN VALLEY, CA 91352

B. Facility WDID No:

4 19S010680

C. Facility Operator Information:

Contact Person:
MILT HOFFMAN
(818) 504-1091

AADLEN BROS. AUTO WRECKING
11590 TUXFORD STREET
SUN VALLEY, CA 91352

D. Facility Information:

Contact Person:
MILT HOFFMAN
(818) 504-1091

Mailing Address: AADLEN BROS. AUTO WRECKING
11590 TUXFORD
SUN VALLEY, CA 91352

SIC Code(s):
5015 Motor Vehicle Parts, Used

4. For each storm event sampled, did you collect and analyze a sample from each of the facilitys' storm water discharge locations? ☐ YES, go to Item E.6 ☐ NO

5. Was sample collection or analysis reduced in accordance with Section B.7.d of the General Permit? ☐ YES ☐ NO, **attach explanation**

   If "YES", **attach documentation** supporting your determination that two or more drainage areas are substantially identical.

   Date facility's drainage areas were last evaluated ___/___/___

6. Were <u>all</u> samples collected during the first hour of discharge? ☐ YES ☐ NO, **attach explanation**

7. Was <u>all</u> storm water sampling preceded by three (3) working days without a storm water discharge? ☐ YES ☐ NO, **attach explanation**

8. Were there any discharges of stormwater that had been temporarily stored or contained? (such as from a pond) ☐ YES ☐ NO, go to Item E.10

9. Did you collect and analyze samples of temporarily stored or contained storm water discharges from two storm events? (or one storm event if you checked item D.2.i or iii. above) ☐ YES ☐ NO, **attach explanation**

10. Section B.5. of the General Permit requires you to analyze storm water samples for pH, Total Suspended Solids (TSS), Specific Conductance (SC), Total Organic Carbon (TOC) or Oil and Grease (O&G), other pollutants likely to be present in storm water discharges in significant quantities, and analytical parameters listed in Table D of the General Permit.

    a. Does Table D contain any additional parameters related to your facility's SIC code(s)? ☐ YES ☐ NO, Go to Item E.11

    b. Did you analyze all storm water samples for the applicable parameters listed in Table D? ☐ YES ☐ NO

    c. If you did not analyze all storm water samples for the applicable Table D parameters, check one of the following reasons:

    _____ In prior sampling years, the parameter(s) have not been detected in significant quantities from two consecutive sampling events. **Attach explanation**

    _____ The parameter(s) is not likely to be present in storm water discharges and authorized non-storm water discharges in significant quantities based upon the facility operator's evaluation. **Attach explanation**

    _____ Other. **Attach explanation**

11. For each storm event sampled, attach a copy of the laboratory analytical reports and report the sampling and analysis results using **Form 1** or its equivalent. The following must be provided for each sample collected:

- Date and time of sample collection
- Name and title of sampler.
- Parameters tested.
- Name of analytical testing laboratory.
- Discharge location identification.
- Testing results.
- Test methods used.
- Test detection limits.
- Date of testing.
- Copies of the laboratory analytical results.

G. MONTHLY WET SEASON VISUAL OBSERVATIONS

Section B.4.a of the General Permit requires you to conduct monthly visual observations of storm water discharges at all storm water discharge locations during the wet season. These observations shall occur during the first hour of discharge or, in the case of temporarily stored or contained storm water, at the time of discharge.

1. Indicate below whether monthly visual observations of storm water discharges occurred at all discharge locations. **Attach an explanation for any "NO" answers.** Include in this explanation whether any eligible storm events occurred during scheduled facility operating hours that did not result in a storm water discharge, and provide the date, time, name and title of the person who observed that there was no storm water discharge.

	YES	NO		YES	NO
October	☐	☑ No Rain	February	☑	☐
November	☐	☑ No Rain	March	☑	☐
December	☐	☑ No Rain	April	☑	☐
January	☐	☑ No Rain	May	☐	☑ No Rain

2. Report monthly wet season visual observations using **Form 4** or provide the following information.

   a. date, time, and location of observation
   b. name and title of observer
   c. characteristics of the discharge (i.e., odor, color, etc.) and source of any pollutants observed.
   d. **any** new or revised BMPs necessary to reduce or prevent pollutants in storm water discharges. Provide new or revised BMP implementation date.

ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION (ACSCE)

H. ACSCE CHECKLIST

Section A.9 of the General Permit requires the facility operator to conduct one ACSCE in each reporting period (July 1-June 30). Evaluations must be conducted within 8-16 months of each other. The SWPPP and monitoring program shall be revised and implemented, as necessary, within 90 days of the evaluation. The checklist below includes the minimum steps necessary to complete a ACSCE. Indicate whether you have performed each step below. **Attach an explanation for any "NO" answers.**

1. Have you inspected all potential pollutant sources and industrial activities areas? ☑ YES ☐ NO
   The following areas should be inspected:

   - areas where spills and leaks have occured during the last year.
   - outdoor wash and rinse areas.
   - process/manufacturing areas.
   - loading, unloading, and transfer areas.
   - waste storage/disposal areas.
   - dust/particulate generating areas.
   - erosion areas.
   - building repair, remodeling, and construction
   - material storage areas
   - vehicle/equipment storage areas
   - truck parking and access areas
   - rooftop equipment areas
   - vehicle fueling/maintenance areas
   - non-storm water discharge generating areas

2. Have you reviewed your SWPPP to assure that its BMPs address existing potential pollutant sources and industrial activities areas? ☑ YES ☐ NO

3. Have you inspected the entire facility to verify that the SWPPP's site map, is up-to-date? The following site map items should be verified: ☑ YES ☐ NO

   - facility boundaries
   - outline of all storm water drainage areas
   - areas impacted by run-on
   - storm water discharges locations
   - storm water collection and conveyance system
   - structural control measures such as catch basins, berms, containment areas, oil/water separators, etc.

ATTACHMENT SUMMARY

Answer the questions below to help you determine what should be attached to this annual report. Answer NA (Not Applicable) to questions 2-4 if you are not required to provide those attachments.

1. Have you attached Forms 1,2,3,4, and 5 or their equivalent?	☑ YES (Mandatory)		
2. If you conducted sampling and analysis, have you attached the laboratory analytical reports?	☐ YES	☐ NO	☑ NA
3. If you checked box II, III, IV, or V in item D.2 of this Annual Report, have you attached the first page of the appropriate certifications?	☐ YES	☐ NO	☑ NA
4. Have you attached an explanation for each "NO" answer in items E.1, E.2, E.5-E.7, E.9, E.10.c, F.1.b, F.2.a, F.2.c, G.1, H.1-H.7, or J?	☑ YES	☐ NO	☐ NA

ANNUAL REPORT CERTIFICATION

I am duly authorized to sign reports required by the INDUSTRIAL ACTIVITIES STORM WATER GENERAL PERMIT (see Standard Provision C.9) and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: Jerry Martinez

Signature: Jerry Martinez Date: 5/31/00

Title: Storm Water Mngr.

N/A

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FORM 1-SAMPLING & ANALYSIS RESULTS

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FIRST STORM EVENT

- If analytical results are less than the detection limit (or non detectable), show the value as less than the numerical value of the detection limit (example: <.05)
- If you did not analyze for a required parameter, do not report "0". Instead, leave the appropriate box blank
- When analysis is done using portable analysis (such as portable pH meters, SC meters, etc.), indicate "PA" in the appropriate test method used box.
- Make additional copies of this form as necessary.

NAME OF PERSON COLLECTING SAMPLE(S): _____ TITLE: _____ SIGNATURE: _____

DESCRIBE DISCHARGE LOCATION Example: NW Out Fall	DATE/TIME OF SAMPLE COLLECTION	TIME DISCHARGE STARTED	ANALYTICAL RESULTS For First Storm Event									
			BASIC PARAMETERS					OTHER PARAMETERS				
			pH	TSS	SC	O&G	TOC					
	__/__/__ ☐AM __:__ ☐PM	☐AM __:__ ☐PM										
	__/__/__ ☐AM __:__ ☐PM	☐AM __:__ ☐PM										
	__/__/__ ☐AM __:__ ☐PM	☐AM __:__ ☐PM										
	__/__/__ ☐AM __:__ ☐PM	☐AM __:__ ☐PM										
TEST REPORTING UNITS:			pH Units	mg/l	umho/cm	mg/l	mg/l					
TEST METHOD DETECTION LIMIT:												
TEST METHOD USED:												
ANALYZED BY (SELF/LAB):												

TSS - Total Suspended Solids SC - Specific Conductance O&G - Oil & Grease TOC - Total Organic Carbon

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FORM 2-QUARTERLY VISUAL OBSERVATIONS OF AUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

- Quarterly dry weather visual observations are required of each authorized NSWD.
- Observe each authorized NSWD source, impacted drainage area, and discharge location.
- Authorized NSWDs must meet the conditions provided in Section D (pages 5-6), of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** DATE: / /	Observers Name: Jerry Martinez Title: Storm Water Mgr. Signature: Jerry Martinez	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?**	☐ YES ☑ NO If **YES**, complete reverse side of this form.
QUARTER: **OCT.-DEC.** DATE: / /	Observers Name: Title: Signature: Jerry Martinez	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?**	☐ YES ☑ NO If **YES**, complete reverse side of this form.
QUARTER: **JAN.-MARCH** DATE: / /	Observers Name: Title: Signature: Jerry Martinez	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?**	☐ YES ☑ NO If **YES**, complete reverse side of this form.
QUARTER: **APRIL-JUNE** DATE: / /	Observers Name: Title: Signature: Jerry Martinez	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?**	☐ YES ☑ NO If **YES**, complete reverse side of this form.

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FORM 3-QUARTERLY VISUAL OBSERVATIONS OF UNAUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

- Unauthorized NSWDs are discharges (such as wash or rinse waters) that do not meet the conditions provided in Section D (pages 5-6) of the General Permit.
- Quarterly visual observations are required to observe current and detect prior unauthorized NSWDs.
- Quarterly visual observations are required during dry weather and at all facility drainage areas.
- Each unauthorized NSWD source, impacted drainage area, and discharge location must be identified and observed.
- Unauthorized NSWDs that can not be eliminated within 90 days of observation must be reported to the Regional Board in accordance with Section A.10.e of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** **DATE/TIME OF OBSERVATIONS** 8/15/99 4:00 ☐ AM ☒ PM	Observers Name: Jerry Martinez Title: Storm Water Mgr. Signature: Jerry Martinez	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **OCT.-DEC.** **DATE/TIME OF OBSERVATIONS** 11/15/99 4:00 ☐ AM ☒ PM	Observers Name: Title: Signature: Jerry Martinez	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **JAN.-MARCH** **DATE/TIME OF OBSERVATIONS** 2/10/00 4:00 ☐ AM ☒ PM	Observers Name: Title: Signature: Jerry Martinez	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **APRIL-JUNE** **DATE/TIME OF OBSERVATIONS** 5/15/00 4:00 ☐ AM ☒ PM	Observers Name: Title: Signature: Jerry Martinez	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.

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FORM 4-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

SIDE A

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

NO RAIN Observation Date: October ____ 1999 Observers Name: Jerry Martinez Title: Storm Water Mgr. Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: November____ 1999 NO RAIN Observers Name: _____ Title: _____ Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: December____ 1999 NO RAIN Observers Name: _____ Title: _____ Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: January____ 2000 NO RAIN Observers Name: _____ Title: _____ Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

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FORM 4 (Continued)-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

SIDE A

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

		#1	#2	#3	#4
Observation Date: February 29 2000 Observers Name: Jerry Martinez Title: Storm Water Mgr. Signature: Jerry Martinez	Drainage Location Description	Parking Lot			
	Observation Time	4: ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	3:30 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: March 7 2000 Observers Name: Title: Signature: Jerry Martinez	Drainage Location Description	#1 Parking Lot	#2	#3	#4
	Observation Time	3: ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	2:30 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: April 17 2000 Observers Name: Title: Signature: Jerry Martinez	Drainage Location Description	#1 Parking Lot	#2	#3	#4
	Observation Time	10: ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	9:30 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: May ___ 2000 No Rain Observers Name: Title: Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

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FORM 5-ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY BMP STATUS

SIDE

EVALUATION DATE: 5/31/00 INSPECTOR NAME: Jerry Martinez TITLE: StormWater Mgr. SIGNATURE: Jerry Martinez

POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	ARE ADDITIONAL/REVISED BMPs NECESSARY?	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
Hazardous Waste Storage Area	☒ YES ☐ NO	☐ YES ☒ NO		No Second Containment for oil-Gas	Provide Secondary Containment 9-15-00
Dismantling Area	☐ YES ☒ NO	☐ YES ☒ NO			
Vehicle Storage Area	☐ YES ☒ NO	☐ YES ☒ NO			
Outside Parts Storage Area	☐ YES ☒ NO	☐ YES ☒ NO			

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD

2001-2002 ANNUAL REPORT

FOR STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITIES

Reporting Period July 1, 2001 through June 30, 2002

An Annual Report is required to be submitted to your local Regional Water Quality Control Board (Regional Board) by July 1 of each year. This document must be certified and signed, under penalty of perjury, by the appropriate official of your company. Many of the Annual Report questions require an explanation. Please provide explanations on a separate sheet as an attachment. **Retain a copy of the completed Annual Report for your records.**

If any information contained in Items A, B, and C below is incorrect, please cross out or highlight the incorrect information (do not white out or erase) and provide the correct information next to or above the incorrect information so that we can update our records. Please remember that a Notice of Termination and new Notice of Intent is required whenever your facility is relocated or changes ownership.

If you have any questions, please contact your Regional Board Storm Water Program Contact. The address of the Regional Board (where the Annual Report must be submitted) along with the name, telephone number, and e-mail address of the contact is indicated below. Additional copies of the Annual Report may be obtained from our web site at **www.swrcb.ca.gov/stormwtr/industrial.html**

REGIONAL BOARD INFORMATION:

LOS ANGELES REGIONAL WATER BOARD
320 W. 4TH STREET, STE 200
LOS ANGELES, CA 90013

SUMAIRA NOREEN
Tel: (213) 576-1369
E-mail: snoreen@rb4.swrcb.ca.gov

GENERAL INFORMATION

A. Facility Location:

Aadlen Bros Auto Wrecking
11590 Tuxford St
Sun Valley, CA 91352-3186

Facility WDID No: 4 19S010680

B. Facility Operator Information:

Contact Person:
JERRY MARTINEZ
Tel: (818) 504-1093

Aadlen Bros Auto Wrecking
11590 Tuxford St
Sun Valley, CA 91352-3186

C. Facility Information:

Contact Person:
JERRY MARTINEZ
Tel: (818) 504-1173

Mailing Address: Aadlen Bros Auto Wrecking
11590 Tuxford St
Sun Valley, CA 91352-3186

SIC Code(s):
5015 Motor Vehicle Parts, Used

Additional Table D Parameters: Fe,Pb,Al

4. For each storm event sampled, did you collect and analyze a sample from each of the facilitys' storm water discharge locations? ☐ YES, go to Item E.6 ☐ NO

5. Was sample collection or analysis reduced in accordance with Section B.7.d of the General Permit? ☐ YES ☐ NO, **attach explanation**

   If "YES", **attach documentation** supporting your determination that two or more drainage areas are substantially identical.

   Date facility's drainage areas were last evaluated ___/___/___

6. Were <u>all</u> samples collected during the first hour of discharge? ☐ YES ☐ NO, **attach explanation**

7. Was <u>all</u> storm water sampling preceded by three (3) working days without a storm water discharge? ☐ YES ☐ NO, **attach explanation**

8. Were there any discharges of stormwater that had been temporarily stored or contained? (such as from a pond) ☐ YES ☐ NO, go to Item E.10

9. Did you collect and analyze samples of temporarily stored or contained storm water discharges from two storm events? (or one storm event if you checked item D.2.i or iii. above) ☐ YES ☐ NO, **attach explanation**

10. Section B.5. of the General Permit requires you to analyze storm water samples for pH, Total Suspended Solids (TSS), Specific Conductance (SC), Total Organic Carbon (TOC) or Oil and Grease (O&G), other pollutants likely to be present in storm water discharges in significant quantities, and analytical parameters listed in Table D of the General Permit.

    a. Does Table D contain any additional parameters related to your facility's SIC code(s)? ☐ YES ☐ NO, Go to Item E.11

    b. Did you analyze all storm water samples for the applicable parameters listed in Table D? ☐ YES ☐ NO

    c. If you did not analyze all storm water samples for the applicable Table D parameters, check one of the following reasons:

    _____ In prior sampling years, the parameter(s) have not been detected in significant quantities from two consecutive sampling events. **Attach explanation**

    _____ The parameter(s) is not likely to be present in storm water discharges and authorized non-storm water discharges in significant quantities based upon the facility operator's evaluation. **Attach explanation**

    _____ Other. **Attach explanation**

11. For each storm event sampled, attach a copy of the laboratory analytical reports and report the sampling and analysis results using **Form 1** or its equivalent. The following must be provided for each sample collected:

- Date and time of sample collection
- Name and title of sampler.
- Parameters tested.
- Name of analytical testing laboratory.
- Discharge location identification.
- Testing results.
- Test methods used.
- Test detection limits.
- Date of testing.
- Copies of the laboratory analytical results.

G. MONTHLY WET SEASON VISUAL OBSERVATIONS

Section B.4.a of the General Permit requires you to conduct monthly visual observations of storm water discharges at all storm water discharge locations during the wet season. These observations shall occur during the first hour of discharge or, in the case of temporarily stored or contained storm water, at the time of discharge.

1. Indicate below whether monthly visual observations of storm water discharges occurred at all discharge locations. **Attach an explanation for any "NO" answers.** Include in this explanation whether any eligible storm events occurred during scheduled facility operating hours that did not result in a storm water discharge, and provide the date, time, name and title of the person who observed that there was no storm water discharge.

	YES	NO		YES	NO
October	☐	☑ No discharge	February	☐	☑ Not during bus. hrs.
November	☐	☑ No discharge	March	☐	☑ No discharge
December	☐	☑ " "	April	☐	☑ " "
January	☐	☑ " "	May	☐	☑ " "

2. Report monthly wet season visual observations using **Form 4** or provide the following information.

   a. date, time, and location of observation
   b. name and title of observer
   c. characteristics of the discharge (i.e., odor, color, etc.) and source of any pollutants observed.
   d. **any** new or revised BMPs necessary to reduce or prevent pollutants in storm water discharges. Provide new or revised BMP implementation date.

ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION (ACSCE)

H. ACSCE CHECKLIST

Section A.9 of the General Permit requires the facility operator to conduct one ACSCE in each reporting period (July 1-June 30). Evaluations must be conducted within 8-16 months of each other. The SWPPP and monitoring program shall be revised and implemented, as necessary, within 90 days of the evaluation. The checklist below includes the minimum steps necessary to complete a ACSCE. Indicate whether you have performed each step below. Attach an **explanation for any "NO" answers.**

1. Have you inspected all potential pollutant sources and industrial activities areas? ☑ YES ☐ NO
   The following areas should be inspected:

   - areas where spills and leaks have occured during the last year.
   - outdoor wash and rinse areas.
   - process/manufacturing areas.
   - loading, unloading, and transfer areas.
   - waste storage/disposal areas.
   - dust/particulate generating areas.
   - erosion areas.
   - building repair, remodeling, and construction
   - material storage areas
   - vehicle/equipment storage areas
   - truck parking and access areas
   - rooftop equipment areas
   - vehicle fueling/maintenance areas
   - non-storm water discharge generating areas

2. Have you reviewed your SWPPP to assure that its BMPs address existing potential pollutant sources and industrial activities areas? ☑ YES ☐ NO

3. Have you inspected the entire facility to verify that the SWPPP's site map, is up-to-date? The following site map items should be verified: ☑ YES ☐ NO

   - facility boundaries
   - outline of all storm water drainage areas
   - areas impacted by run-on
   - storm water discharges locations
   - storm water collection and conveyance system
   - structural control measures such as catch basins, berms, containment areas, oil/water separators, etc.

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ATTACHMENT SUMMARY

Answer the questions below to help you determine what should be attached to this annual report. Answer NA (Not Applicable) to questions 2-4 if you are not required to provide those attachments.

1. Have you attached Forms 1,2,3,4, and 5 or their equivalent? ☑ YES (Mandatory)

2. If you conducted sampling and analysis, have you attached the laboratory analytical reports? ☐ YES ☐ NO ☑ NA

3. If you checked box II, III, IV, or V in item D.2 of this Annual Report, have you attached the first page of the appropriate certifications? ☐ YES ☐ NO ☑ NA

4. Have you attached an explanation for each "NO" answer in items E.1, E.2, E.5-E.7, E.9, E.10.c, F.1.b, F.2.a, F.2.c, G.1, H.1-H.7, or J? ☑ YES ☐ NO ☐ NA

ANNUAL REPORT CERTIFICATION

I am duly authorized to sign reports required by the INDUSTRIAL ACTIVITIES STORM WATER GENERAL PERMIT (see Standard Provision C.9) and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: Milt Hoffman

Signature: _____ Date: 6/4/02

Title: G.M.

N/A

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FORM 1-SAMPLING & ANALYSIS RESULTS

SIDE A

FIRST STORM EVENT

- If analytical results are less than the detection limit (or non detectable), show the value as less than the numerical value of the detection limit (example: <.05)
- If you did not analyze for a required parameter, do not report "0". Instead, leave the appropriate box blank
- When analysis is done using portable analysis (such as portable pH meters, SC meters, etc.), indicate "PA" in the appropriate test method used box.
- Make additional copies of this form as necessary.

NAME OF PERSON COLLECTING SAMPLE(S): _____ **TITLE:** _____ **SIGNATURE:** _____

DESCRIBE DISCHARGE LOCATION Example: NW Out Fall	DATE/TIME OF SAMPLE COLLECTION	TIME DISCHARGE STARTED	ANALYTICAL RESULTS For First Storm Event									
			BASIC PARAMETERS					OTHER PARAMETERS				
			pH	TSS	SC	O&G	TOC					
	/ / : ☐ AM ☐ PM	: ☐ AM ☐ PM										
	/ / : ☐ AM ☐ PM	: ☐ AM ☐ PM										
	/ / : ☐ AM ☐ PM	: ☐ AM ☐ PM										
	/ / : ☐ AM ☐ PM	: ☐ AM ☐ PM										
TEST REPORTING UNITS:			pH Units	mg/l	umho/cm	mg/l	mg/l					
TEST METHOD DETECTION LIMIT:												
TEST METHOD USED:												
ANALYZED BY (SELF/LAB):												

TSS - Total Suspended Solids SC - Specific Conductance O&G - Oil & Grease TOC - Total Organic Carbon

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FORM 1-SAMPLING & ANALYSIS RESULTS

SIDE B

SECOND STORM EVENT

- If analytical results are less than the detection limit (or non detectable), show the value as less than the numerical value of the detection limit (example: <.05)
- If you did not analyze for a required parameter, do not report "0". Instead, leave the appropriate box blank
- When analysis is done using portable analysis (such as portable pH meters, SC meters, etc.), indicate "PA" in the appropriate test method used box.

NAME OF PERSON COLLECTING SAMPLE(S):_____ **TITLE:** _____ **SIGNATURE:** _____

DESCRIBE DISCHARGE LOCATION Example: NW Out Fall	DATE/TIME OF SAMPLE COLLECTION	TIME DISCHARGE STARTED	ANALYTICAL RESULTS For Second Storm Event									
			BASIC PARAMETERS					OTHER PARAMETERS				
			pH	TSS	SC	O&G	TOC					
	__/__/__ ☐AM ☐PM	__:__ ☐AM ☐PM										
	__/__/__ ☐AM ☐PM	__:__ ☐AM ☐PM										
	__/__/__ ☐AM ☐PM	__:__ ☐AM ☐PM										
	__/__/__ ☐AM ☐PM	__:__ ☐AM ☐PM										
TEST REPORTING UNITS:			pH Units	mg/l	umho/cm	mg/l	mg/l					
TEST METHOD DETECTION LIMIT:												
TEST METHOD USED:												
ANALYZED BY (SELF/LAB):												

TSS - Total Suspended Solids SC - Specific Conductance O&G - Oil & Grease TOC - Total Organic Carbon

N/A

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FORM 2-QUARTERLY VISUAL OBSERVATIONS OF AUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

SIDE A

- Quarterly dry weather visual observations are required of each authorized NSWD.
- Observe each authorized NSWD source, impacted drainage area, and discharge location.
- Authorized NSWDs must meet the conditions provided in Section D (pages 5-6), of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ **YES** ☐ **NO** If **YES**, complete reverse side of this form.
QUARTER: **OCT.-DEC.** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ **YES** ☐ **NO** If **YES**, complete reverse side of this form.
QUARTER: **JAN.-MARCH** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ **YES** ☐ **NO** If **YES**, complete reverse side of this form.
QUARTER: **APRIL-JUNE** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ **YES** ☐ **NO** If **YES**, complete reverse side of this form.

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SIDE B

FORM 2-QUARTERLY VISUAL OBSERVATIONS OF AUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

DATE /TIME OF OBSERVATION	SOURCE AND LOCATION OF AUTHORIZED NSWD EXAMPLE: Air conditioner Units on Building C	NAME OF AUTHORIZED NSWD EXAMPLE: Air conditioner condensate	DESCRIBE AUTHORIZED NSWD CHARACTERISTICS Indicate whether authorized NSWD is clear, cloudy, or discolored, causing staining, contains floating objects or an oil sheen, has odors, etc.		DESCRIBE ANY REVISED OR NEW BMPs AND PROVIDE THEIR IMPLEMENTATION DATE
			At the NSWD Source	At the NSWD Drainage Area and Discharge Location	
__/__/__ __:__ ☐AM ☐PM					
__/__/__ __:__ ☐AM ☐PM					
__/__/__ __:__ ☐AM ☐PM					
__/__/__ __:__ ☐AM ☐PM					
__/__/__ __:__ ☐AM ☐PM					

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FORM 3-QUARTERLY VISUAL OBSERVATIONS OF UNAUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

SIDE A

- Unauthorized NSWDs are discharges (such as wash or rinse waters) that do not meet the conditions provided in Section D (pages 5-6) of the General Permit.
- Quarterly visual observations are required to observe current and detect prior unauthorized NSWDs.
- Quarterly visual observations are required during dry weather and at all facility drainage areas.
- Each unauthorized NSWD source, impacted drainage area, and discharge location must be identified and observed.
- Unauthorized NSWDs that can not be eliminated within 90 days of observation must be reported to the Regional Board in accordance with Section A.10.e of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** **DATE/TIME OF OBSERVATIONS** ☒ AM ☐ PM 8/31/01 2:30	Observers Name: Mick Hoffman Title: GM Signature:	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **OCT.-DEC.** **DATE/TIME OF OBSERVATIONS** ☒ AM ☐ PM 11/15/01 10:00	Observers Name: Mick Hoffman Title: G.M Signature:	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **JAN.-MARCH** **DATE/TIME OF OBSERVATIONS** ☒ AM ☐ PM 2/15/02 10:00	Observers Name: Mick Hoffman Title: GM Signature:	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **APRIL-JUNE** **DATE/TIME OF OBSERVATIONS** ☒ AM ☐ PM 6/4/02 8:30	Observers Name: Mick Hoffman Title: GM Signature:	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.

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SIDE B

FORM 3 QUARTERLY VISUAL OBSERVATIONS OF UNAUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

OBSERVATION DATE (FROM REVERSE SIDE)	NAME OF UNAUTHORIZED NSWD EXAMPLE: Vehicle Wash Water	SOURCE AND LOCATION OF UNAUTHORIZED NSWD EXAMPLE: NW Corner of Parking Lot	DESCRIBE UNAUTHORIZED NSWD CHARACTERISTICS Indicate whether unauthorized NSWD is clear, cloudy, discolored, causing stains; contains floating objects or an oil sheen, has odors, etc.		DESCRIBE CORRECTIVE ACTIONS TO ELIMINATE UNAUTHORIZED NSWD AND TO CLEAN IMPACTED DRAINAGE AREAS. PROVIDE UNAUTHORIZED NSWD ELIMINATION DATE.
			AT THE UNAUTHORIZED NSWD SOURCE	AT THE UNAUTHORIZED NSWD AREA AND DISCHARGE LOCATION	
__/__/__ __:__ ☐AM ☐PM					
__/__/__ __:__ ☐AM ☐PM					
__/__/__ __:__ ☐AM ☐PM					
__/__/__ __:__ ☐AM ☐PM					

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ANNUAL REPORT

FORM 4-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

SIDE A

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

Observation Date: October 30 2001 Observers Name: [illegible] Title: Co Signature: [illegible] 12-24-29	no Discharge Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: November 2001 Observers Name: Title: Signature: 14-21-29	no Discharge Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: December 2001 Observers Name: Title: Signature: 3-21	no Discharge Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: January 2002 Observers Name Title Signature	no Discharge Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

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ANNUAL REPORT

SIDE B

FORM 4-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

DATE/TIME OF OBSERVATION (From Reverse Side)	DRAINAGE AREA DESCRIPTION EXAMPLE: Discharge from material storage Area #2	DESCRIBE STORM WATER DISCHARGE CHARACTERISTICS Indicate whether storm water discharge is clear, cloudy, or discolored; causing staining; containing floating objects or an oil sheen, has odors, etc.	IDENTIFY AND DESCRIBE SOURCE(S) OF POLLUTANTS EXAMPLE: Oil sheen caused by oil dripped by trucks in vehicle maintenance area.	DESCRIBE ANY REVISED OR NEW BMPs AND THEIR DATE OF IMPLEMENTATION
__/__/__ __:__ ☐ AM ☐ PM				
__/__/__ __:__ ☐ AM ☐ PM				
__/__/__ __:__ ☐ AM ☐ PM				
__/__/__ __:__ ☐ AM ☐ PM				
__/__/__ __:__ ☐ AM ☐ PM				

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ANNUAL REPORT

FORM 4 (Continued)-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

SIDE A

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

Observation Date: February 17 2002 Observers Name: Mike Hoffman Title: GM Signature:	Out of Duty Bus Hrs Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: March 31 2002 Observers Name: Title: Signature:	no Discharge Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: April 15 2002 Observers Name: Title: Signature:	no Discharge Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: May 29 2002 Observers Name Title Signature	no Discharge Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

2001-2002

ANNUAL REPORT

SIDE B

FORM 4 (Continued)-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

DATE/TIME OF OBSERVATION (From Reverse Side)	DRAINAGE AREA DESCRIPTION EXAMPLE: Discharge from material storage Area #2	DESCRIBE STORM WATER DISCHARGE CHARACTERISTICS Indicate whether storm water discharge is clear, cloudy, or discolored; causing staining; containing floating objects or an oil sheen, has odors, etc.	IDENTIFY AND DESCRIBE SOURCE(S) OF POLLUTANTS EXAMPLE: Oil sheen caused by oil dripped by trucks in vehicle maintenance area.	DESCRIBE ANY REVISED OR NEW BMPs AND THEIR DATE OF IMPLEMENTATION
__/__/__ __:__ ☐ AM ☐ PM				
__/__/__ __:__ ☐ AM ☐ PM				
__/__/__ __:__ ☐ AM ☐ PM				
__/__/__ __:__ ☐ AM ☐ PM				
__/__/__ __:__ ☐ AM ☐ PM				

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ANNUAL REPORT

FORM 5-ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY BMP STATUS

SIDE

EVALUATION DATE: 6/4/02 INSPECTOR NAME: Matt Hatton TITLE: G-M SIGNATURE:

POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)			Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
Hazardous Waste Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form		
Dismantling Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
Vehicle Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
Outside Parts Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation

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ANNUAL REPORT

FORM 5 (Continued)-ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY BMP STATUS

S

EVALUATION DATE 6/14/02 INSPECTOR NAME Matt Hoffman TITLE: G. M SIGNATURE:

POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)					
Loading and Unloading Areas	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐YES ☒NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐YES ☒NO			
Core Storage Areas	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐YES ☒NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐YES ☒NO			
Dust Generating and Soil Erosion Areas	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐YES ☒NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐YES ☒NO			
SWPPP Available SWPPP Signed	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐YES ☒NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐YES ☒NO			

State of California
STATE WATER RESOURCES CONTROL BOARD

2002-2003
ANNUAL REPORT
FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

COPY

Reporting Period July 1, 2002 through June 30, 2003

An annual report is required to be submitted to your local Regional Water Quality Control Board (Regional Board) by July 1 of each year. This document must be certified and signed, under penalty of perjury, by the appropriate official of your company. Many of the Annual Report questions require an explanation. Please provide explanations on a separate sheet as an attachment. **Retain a copy of the completed Annual Report for your records.**

If any information contained in Items A, B, C, and D below differs from the information provided in your Notice of Intent (NOI), circle or highlight the information that differs from your NOI so we can update our records. Please remember that a Notice of Termination and new Notice of Intent are required whenever a facility is relocated or changes ownership.

If you have any questions, please contact your Regional Board Storm Water Program Contact. The address of the Regional Board (where the Annual Report must be filed) along with the name, telephone number and e-mail address of the contact is indicated on page 8 of this Annual Report. To find your Regional Board information, match the first digit of your WDID number with the corresponding number that appears in parenthesis on the first line of each Regional Board office.

GENERAL INFORMATION:

A. *Facility Location:* **Facility WDID No:** 4 B 19S 010680

Facility Name: Andrew Bros. Auto Wrecking
Address: 11590 Tuxford St.
City: Sun Valley State: CA Zip: 91352 Phone: 818-504-1173

B. *Facility Operator Information:*

Operator Name: Jerry Martinez Contact Person: Jerry Martinez
Mailing Address: 11590 Tuxford St Title: Manager
City: Sun Valley State: CA Zip: 91352 Phone: 818-504-1173

C. *Facility Information:* *(Complete if different from facility mailing address in Item A above)*

Street Address: _____
City: _____ State: CA Zip: _____
Standard Industrial Classification (SIC) Code(s): 5015

4. For each storm event sampled, did you collect and analyze a sample from each of the facility's' storm water discharge locations? ☑ YES, go to Item E.6 ☐ NO

5. Was sample collection or analysis reduced in accordance with Section B.7.d of the General Permit? ☐ YES ☐ NO, **attach explanation**

   If "YES", **attach documentation** supporting your determination that two or more drainage areas are substantially identical.

   Date facility's drainage areas were last evaluated __/__/__

6. Were all samples collected during the first hour of discharge? ☑ YES ☐ NO, **attach explanation**

7. Was all storm water sampling preceded by three (3) working days without a storm water discharge? ☑ YES ☐ NO, **attach explanation**

8. Were there any discharges of storm water that had been temporarily stored or contained? (such as from a pond) ☐ YES ☑ NO, go to Item E.10

9. Did you collect and analyze samples of temporarily stored or contained storm water discharges from two storm events? (or one storm event if you checked item D.2.i or iii. above) ☐ YES ☐ NO, **attach explanation**

10. Section B.5. of the General Permit requires you to analyze storm water samples for pH, Total Suspended Solids (TSS), Specific Conductance (SC), Total Organic Carbon (TOC) or Oil and Grease (O&G), other pollutants likely to be present in storm water discharges in significant quantities, and analytical parameters listed in Table D of the General Permit.

    a. Does Table D contain any additional parameters related to your facility's SIC code(s)? ☑ YES ☐ NO, Go to Item E.11

    b. Did you analyze all storm water samples for the applicable parameters listed in Table D? ☐ YES ☑ NO

    c. If you did not analyze all storm water samples for the applicable Table D parameters, check one of the following reasons:

    ____ In prior sampling years, the parameter(s) have not been detected in significant quantities from two consecutive sampling events. **Attach explanation**

    ____ The parameter(s) is not likely to be present in storm water discharges and authorized non-storm water discharges in significant quantities based upon the facility operator's evaluation. **Attach explanation**

    ✓ Other. **Attach explanation** Cu + Zn instead of Al + Fe

11. For each storm event sampled, attach a copy of the laboratory analytical reports and report the sampling and analysis results using **Form 1** or its equivalent. The following must be provided for each sample collected:

- Date and time of sample collection
- Name and title of sampler
- Parameters tested
- Name of analytical testing laboratory
- Discharge location identification
- Testing results
- Test methods used
- Test detection limits
- Date of testing
- Copies of the laboratory analytical results

G. MONTHLY WET SEASON VISUAL OBSERVATIONS

Section B.4.a of the General Permit requires you to conduct monthly visual observations of storm water discharges at all storm water discharge locations during the wet season. These observations shall occur during the first hour of discharge or, in the case of temporarily stored or contained storm water, at the time of discharge.

1. Indicate below whether monthly visual observations of storm water discharges occurred at all discharge locations. **Attach an explanation for any "NO" answers.** Include in this explanation whether any eligible storm events occurred during scheduled facility operating hours that did not result in a storm water discharge, and provide the date, time, name and title of the person who observed that there was no storm water discharge.

	YES	NO		YES	NO
October	☐	☑ No discharge	February	☐	☑ Not during bus. hrs.
November	☐	☑ Not during bus. hrs.	March	☑	☐
December	☑	☐	April	☐	☑ Not during bus. hrs.
January	☐	☑ No Rain	May	☑	☐

2. Report monthly wet season visual observations using **Form 4** or provide the following information:

   a. date, time, and location of observation
   b. name and title of observer
   c. characteristics of the discharge (i.e., odor, color, etc.) and source of any pollutants observed
   d. any new or revised BMPs necessary to reduce or prevent pollutants in storm water discharges. Provide new or revised BMP implementation date.

ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION (ACSCE)

H. ACSCE CHECKLIST

Section A.9 of the General Permit requires the facility operator to conduct one ACSCE in each reporting period (July 1-June 30). Evaluations must be conducted within 8-16 months of each other. The SWPPP and monitoring program shall be revised and implemented, as necessary, within 90 days of the evaluation. The checklist below includes the minimum steps necessary to complete a ACSCE. Indicate whether you have performed each step below. **Attach an explanation for any "NO" answers.**

1. Have you inspected all potential pollutant sources and industrial activities areas? ☑ YES ☐ NO
   The following areas should be inspected:

   - areas where spills and leaks have occurred during the last year
   - outdoor wash and rinse areas
   - process/manufacturing areas
   - loading, unloading, and transfer areas
   - waste storage/disposal areas
   - dust/particulate generating areas
   - erosion areas
   - building repair, remodeling, and construction
   - material storage areas
   - vehicle/equipment storage areas
   - truck parking and access areas
   - rooftop equipment areas
   - vehicle fueling/maintenance areas
   - non-storm water discharge generating areas

2. Have you reviewed your SWPPP to assure that its BMPs address existing potential pollutant sources and industrial activities areas? ☑ YES ☐ NO

3. Have you inspected the entire facility to verify that the SWPPP's site map is up-to-date? The following site map items should be verified: ☑ YES ☐ NO

   - facility boundaries
   - outline of all storm water drainage areas
   - areas impacted by run-on
   - storm water discharges locations
   - storm water collection and conveyance system
   - structural control measures such as catch basins, berms, containment areas, oil/water separators, etc.

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ATTACHMENT SUMMARY

Answer the questions below to help you determine what should be attached to this annual report. Answer NA (Not Applicable) to questions 2-4 if you are not required to provide those attachments.

1. Have you attached Forms 1,2,3,4, and 5 or their equivalent?	☑ YES (Mandatory)		
2. If you conducted sampling and analysis, have you attached the laboratory analytical reports?	☑ YES	☐ NO	☐ NA
3. If you checked box II, III, IV, or V in item D.2 of this Annual Report, have you attached the first page of the appropriate certifications?	☐ YES	☐ NO	☑ NA
4. Have you attached an explanation for each "NO" answer in items E.1, E.2, E.5-E.7, E.9, E.10.c, F.1.b, F.2.a, F.2.c, G.1, H.1-H.7, or J?	☑ YES	☐ NO	☐ NA

ANNUAL REPORT CERTIFICATION

I am duly authorized to sign reports required by the INDUSTRIAL ACTIVITIES STORM WATER GENERAL PERMIT (see Standard Provision C.9) and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: MICT NOFFSINGER

Signature: _____ Date: 5/28/03

Title: GM

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FORM 1-SAMPLING & ANALYSIS RESULTS

SIDE A

FIRST STORM EVENT

- If analytical results are less than the detection limit (or non detectable), show the value as less than the numerical value of the detection limit (example: <.05)
- If you did not analyze for a required parameter, do not report "0". Instead, leave the appropriate box blank
- When analysis is done using portable analysis (such as portable pH meters, SC meters, etc.), indicate "PA" in the appropriate test method used box.
- Make additional copies of this form as necessary.

NAME OF PERSON COLLECTING SAMPLE(S): Milt Hoffman TITLE: GM SIGNATURE:

DESCRIBE DISCHARGE LOCATION Example: NW Out Fall	DATE/TIME OF SAMPLE COLLECTION	TIME DISCHARGE STARTED	ANALYTICAL RESULTS For First Storm Event									
			BASIC PARAMETERS					OTHER PARAMETERS				
			PH	TSS	SC	O&G	TOC	Cu	Pb	Zn		
Penrose Ave	12/16/02 1:15 ☒ PM	☐ AM 12:45 ☒ PM	7.3	72	190	26		.039	.041	.206		
	/ / : ☐ AM ☐ PM	☐ AM : ☐ PM										
	/ / : ☐ AM ☐ PM	☐ AM : ☐ PM										
	/ / : ☐ AM ☐ PM	☐ AM : ☐ PM										
TEST REPORTING UNITS:			pH Units	mg/l	umho/cm	mg/l	mg/l					
TEST METHOD DETECTION LIMIT:												
TEST METHOD USED:												
ANALYZED BY (SELF/LAB):			LAB									

TSS - Total Suspended Solids SC - Specific Conductance O&G - Oil & Grease TOC - Total Organic Carbon

N/A

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FORM 2-QUARTERLY VISUAL OBSERVATIONS OF AUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

SIDE A

- Quarterly dry weather visual observations are required of each authorized NSWD.
- Observe each authorized NSWD source, impacted drainage area, and discharge location.
- Authorized NSWDs must meet the conditions provided in Section D (pages 5-6), of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ **YES** ☐ **NO** If YES, complete reverse side of this form.
QUARTER: **OCT.-DEC.** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ **YES** ☐ **NO** If YES, complete reverse side of this form.
QUARTER: **JAN.-MARCH** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ **YES** ☐ **NO** If YES, complete reverse side of this form.
QUARTER: **APRIL-JUNE** DATE: __/__/__	**Observers Name:** _____ **Title:** _____ **Signature:** _____	**WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER?** ☐ **YES** ☐ **NO** If YES, complete reverse side of this form.

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ANNUAL REPORT
FORM 3-QUARTERLY VISUAL OBSERVATIONS OF UNAUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

SIDE A

- Unauthorized NSWDs are discharges (such as wash or rinse waters) that do not meet the conditions provided in Section D (pages 5-6) of the General Permit.
- Quarterly visual observations are required to observe current and detect prior unauthorized NSWDs.
- Quarterly visual observations are required during dry weather and at all facility drainage areas.
- Each unauthorized NSWD source, impacted drainage area, and discharge location must be identified and observed.
- Unauthorized NSWDs that can not be eliminated within 90 days of observation must be reported to the Regional Board in accordance with Section A.10.e of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** DATE/TIME OF OBSERVATIONS 8/20/02 9:00 ☒ AM ☐ PM	Observers Name: Milt Hoffman Title: GM Signature:	WERE UNAUTHORIZED NSWDs OBSERVED? ☐ YES ☒ NO WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs? ☐ YES ☒ NO	If YES to either question, complete reverse side.
QUARTER: **OCT.-DEC.** DATE/TIME OF OBSERVATIONS 11/16/02 10:00 ☒ AM ☐ PM	Observers Name: Title: Signature:	WERE UNAUTHORIZED NSWDs OBSERVED? ☐ YES ☒ NO WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs? ☐ YES ☒ NO	If YES to either question, complete reverse side.
QUARTER: **JAN.-MARCH** DATE/TIME OF OBSERVATIONS 2/22/03 10:00 ☒ AM ☐ PM	Observers Name: Title: Signature:	WERE UNAUTHORIZED NSWDs OBSERVED? ☐ YES ☒ NO WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs? ☐ YES ☒ NO	If YES to either question, complete reverse side.
QUARTER: **APRIL-JUNE** DATE/TIME OF OBSERVATIONS 5/28/03 1:00 ☐ AM ☒ PM	Observers Name: Title: Signature:	WERE UNAUTHORIZED NSWDs OBSERVED? ☐ YES ☒ NO WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs? ☐ YES ☒ NO	If YES to either question, complete reverse side.

2002-2003

ANNUAL REPORT

FORM 4-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

SIDE A

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

Observation Date: October 25 2002 No Discharge Observers Name: Mike Hoffman Title: GM Signature:	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: November 7-8-9-29-30 2002 not During But All Observers Name: Title: Signature:	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: December 16 2002 Observers Name: Title: Signature:	Drainage Location Description	#1 Penrose Ave	#2	#3	#4
	Observation Time	1:15 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	12:45 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
No Rain Observation Date: January 2003 Observers Name: Title: Signature:	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

200[illegible] 03

ANNUAL REPORT

FORM 4 (Continued)-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

SIDE A

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

Observation Date: February 11-12 2003 not During Bus Hrs Observers Name: Milt Hoffman Title: B. M Signature:	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: March 4 2003 Observers Name: Title: Signature:	Drainage Location Description	#1 Penrose Ave	#2	#3	#4
	Observation Time	2 :50 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	1 :30 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: April 14 2003 not During Bus Hr Observers Name: Title: Signature:	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: May 3 2003 Observers Name: Title: Signature:	Drainage Location Description	#1 Penrose Ave	#2	#3	#4
	Observation Time	10 :00 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	9 :30 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

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ANNUAL REPORT

SIDE A

FORM 5-ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY BMP STATUS

EVALUATION DATE: 5/29/03 INSPECTOR NAME: Lt Hoffman TITLE: GM1 SIGNATURE:

POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)				
Hazardous Waste Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO			
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)				
Dismantling Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO			
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)				
Vehicle Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO			
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)				
Outside Parts Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO			

ASSOCIATED LABORATORIES
806 North Batavia - Orange, California 92868 - 714/771-6900 *FAX 714/538-1209*

CLIENT Brash Industries (8606)
ATTN: Marvin Saches
4635 Admiralty Way
Marina Del Rey, CA 90292

LAB REQUEST 104271
REPORTED 01/13/2003
RECEIVED 12/19/2002

PROJECT Aadlen Bros. Auto Wrecking

SUBMITTER Client

COMMENTS

This laboratory request covers the following listed samples which were analyzed for the parameters indicated on the attached Analytical Result Report. All analyses were conducted using the appropriate methods as indicated on the report. This cover letter is an integral part of the final report.

Order No.	Client Sample Identification
401346	Penrose Ave.
402137	Laboratory Method Blank

Thank you for the opportunity to be of service to your company. Please feel free to call if there are any questions regarding this report or if we can be of further service.

ASSOCIATED LABORATORIES by,

Edward S. Behare, Ph.D.
Vice President

NOTE: Unless notified in writing, all samples will be discarded by appropriate disposal protocol 30 days from date reported.

TESTING & CONSULTING
Chemical
Microbiological
Environmental

Order #: 401346
Matrix: WATER
Date Sampled: 12/16/2002
Time Sampled: 13:15
mpled By:

Client: Brash Industries
Client Sample ID: Penrose Ave.

Analyte	Result	DF	DLR	Units	Date/Analyst	
120.1 Conductivity						
Conductivity	190	1	1.0	umhos/cm	12/19/02	LN
150.1 pH						
pH	7.30	1		NA	12/19/02	LN
160.2 Total Suspended Solids (TSS)						
Total Suspended Solids	72	1	5.0	mg/L	01/04/03	TN
200.7 ICP Total Metals - Water Only						
Copper	0.039	1	0.01	mg/L	01/03/03	KN
Lead	0.041	1	0.005	mg/L	01/03/03	KN
Zinc	0.206	1	0.01	mg/L	01/03/03	KN
20B Oil and Grease, Gravimetric						
Total Oil and Grease	26	1	5.0	mg/L	01/04/03	BGS

LR = Detection limit for reporting purposes, ND = Not Detected below indicated detection limit, DF = Dilution Factor

COPY

State of California
STATE WATER RESOURCES CONTROL BOARD

2004-2005
ANNUAL REPORT
FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

Reporting Period July 1, 2004 through June 30, 2005

An annual report is required to be submitted to your local Regional Water Quality Control Board (Regional Board) by July 1 of each year. This document must be certified and signed, under penalty of perjury, by the appropriate official of your company. Many of the Annual Report questions require an explanation. Please provide explanations on a separate sheet as an attachment. **Retain a copy of the completed Annual Report for your records.**

Please circle or highlight any information contained in Items A, B, and C below that is new or revised so we can update our records. Please remember that a Notice of Termination and new Notice of Intent are required whenever a facility operation is relocated or changes ownership.

If you have any questions, please contact your Regional Board Industrial Storm Water Permit Contact. The names, telephone numbers and e-mail addresses of the Regional Board contacts, as well as the Regional Board office addresses can be found at http://www.waterboards.ca.gov/stormwtr/contact.html. To find your Regional Board information, match the first digit of your WDID number with the corresponding number that appears in parenthesis on the first line of each Regional Board office.

GENERAL INFORMATION:

A. *Facility Information:*

Facility WDID No: 4B19S010680

Facility Business Name: Aadlen Bros. Auto Wrecking
Physical Address: 11590 Tuxford
City: Sun Valley
Standard Industrial Classification (SIC) Code(s): 5015,5093

Contact Person: Milt Hoffman
e-mail: _____
CA Zip: 91352 Phone: 818-504-1173

B. *Facility Operator Information:*

Operator Name: Aadlen Bros. Auto Wrecking
Mailing Address: 11590 Tuxford
City: Sun Valley

Contact Person: Milt Hoffman
e-mail: _____
State: CA Zip: 91352 Phone: 818-504-1173

C. *Facility Billing Information:*

Operator Name: _____
Mailing Address: _____
City _____

Contact Person: _____
e-mail: _____
State: ___ Zip: _____ Phone: _____

4. For each storm event sampled, did you collect and analyze a sample from each of the facilitys' storm water discharge locations? ☐ YES, go to Item E.6 ☑ NO See E1

5. Was sample collection or analysis reduced in accordance with Section B.7.d of the General Permit? ☐ YES ☑ NO, **attach explanation** "

If "YES", **attach documentation** supporting your determination that two or more drainage areas are substantially identical.

Date facility's drainage areas were last evaluated _____

6. Were all samples collected during the first hour of discharge? ☐ YES ☑ NO, **attach explanation** See E1

7. Was all storm water sampling preceded by three (3) working days without a storm water discharge? ☐ YES ☑ NO, **attach explanation** "

8. Were there any discharges of stormwater that had been temporarily stored or contained? (such as from a pond) ☐ YES ☑ NO, go to Item E.10

9. Did you collect and analyze samples of temporarily stored or contained storm water discharges from two storm events? (or one storm event if you checked item D.2.i or iii. above) ☐ YES ☐ NO, **attach explanation**

10. Section B.5. of the General Permit requires you to analyze storm water samples for pH, Total Suspended Solids (TSS), Specific Conductance (SC), Total Organic Carbon (TOC) or Oil and Grease (O&G), other pollutants likely to be present in storm water discharges in significant quantities, and analytical parameters listed in Table D of the General Permit.

a. Does Table D contain any additional parameters related to your facility's SIC code(s)? ☑ YES ☐ NO, Go to Item E.11

b. Did you analyze all storm water samples for the applicable parameters listed in Table D? ☐ YES ☑ NO

c. If you did not analyze all storm water samples for the applicable Table D parameters, check one of the following reasons:

_____ In prior sampling years, the parameter(s) have not been detected in significant quantities from two consecutive sampling events. **Attach explanation**

_____ The parameter(s) is not likely to be present in storm water discharges and authorized non-storm water discharges in significant quantities based upon the facility operator's evaluation. **Attach explanation**

✓ Other. **Attach explanation** Cu + Zn Instead of Al & Fe

11. For each storm event sampled, attach a copy of the laboratory analytical reports and report the sampling and analysis results using **Form 1** or its equivalent. The following must be provided for each sample collected:

- Date and time of sample collection
- Name and title of sampler.
- Parameters tested.
- Name of analytical testing laboratory.
- Discharge location identification.
- Testing results.
- Test methods used.
- Test detection limits.
- Date of testing.
- Copies of the laboratory analytical results.

G. MONTHLY WET SEASON VISUAL OBSERVATIONS

Section B.4.a of the General Permit requires you to conduct monthly visual observations of storm water discharges at all storm water discharge locations during the wet season. These observations shall occur during the first hour of discharge or, in the case of temporarily stored or contained storm water, at the time of discharge.

1. Indicate below whether monthly visual observations of storm water discharges occurred at all discharge locations. **Attach an explanation for any "NO" answers**. Include in this explanation whether any eligible storm events occurred during scheduled facility operating hours that did not result in a storm water discharge, and provide the date, time, name and title of the person who observed that there was no storm water discharge.

	YES	NO		YES	NO
October	☐	☐ No Discharge During Business Hrs	February	☐	☐ No Discharge During Business Hrs
November	☐	☑ " "	March	☐	☑ " "
December	☐	☑ " "	April	☐	☑ No Rain
January	☐	☑ " "	May	☐	☑ No Discharge During Business Hrs

2. Report monthly wet season visual observations using **Form 4** or provide the following information.

   a. date, time, and location of observation
   b. name and title of observer
   c. characteristics of the discharge (i.e., odor, color, etc.) and source of any pollutants observed.
   d. any new or revised BMPs necessary to reduce or prevent pollutants in storm water discharges. Provide new or revised BMP implementation date.

ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION (ACSCE)

H. ACSCE CHECKLIST

Section A.9 of the General Permit requires the facility operator to conduct one ACSCE in each reporting period (July 1-June 30). Evaluations must be conducted within 8-16 months of each other. The SWPPP and monitoring program shall be revised and implemented, as necessary, within 90 days of the evaluation. The checklist below includes the minimum steps necessary to complete a ACSCE. Indicate whether you have performed each step below. **Attach an explanation for any "NO" answers.**

1. Have you inspected all potential pollutant sources and industrial activities areas? ☑ YES ☐ NO
   The following areas should be inspected:

   - areas where spills and leaks have occured during the last year.
   - outdoor wash and rinse areas.
   - process/manufacturing areas.
   - loading, unloading, and transfer areas.
   - waste storage/disposal areas.
   - dust/particulate generating areas.
   - erosion areas.
   - building repair, remodeling, and construction
   - material storage areas
   - vehicle/equipment storage areas
   - truck parking and access areas
   - rooftop equipment areas
   - vehicle fueling/maintenance areas
   - non-storm water discharge generating areas

2. Have you reviewed your SWPPP to assure that its BMPs address existing potential pollutant sources and industrial activities areas? ☑ YES ☐ NO

3. Have you inspected the entire facility to verify that the SWPPP's site map, is up-to-date? The following site map items should be verified: ☑ YES ☐ NO

   - facility boundaries
   - outline of all storm water drainage areas
   - areas impacted by run-on
   - storm water discharges locations
   - storm water collection and conveyance system
   - structural control measures such as catch basins, berms, containment areas, oil/water separators, etc.

ATTACHMENT SUMMARY

Answer the questions below to help you determine what should be attached to this annual report. Answer NA (Not Applicable) to questions 2-4 if you are not required to provide those attachments.

1. Have you attached Forms 1,2,3,4, and 5 or their equivalent?	☑ YES (Mandatory)		
2. If you conducted sampling and analysis, have you attached the laboratory analytical reports?	☐ YES	☐ NO	☑ NA
3. If you checked box II, III, IV, or V in item D.2 of this Annual Report, have you attached the first page of the appropriate certifications?	☐ YES	☐ NO	☑ NA
4. Have you attached an explanation for each "NO" answer in items E.1, E.2, E.5-E.7, E.9, E.10.c, F.1.b, F.2.a, F.2.c, G.1, H.1-H.7, or J?	☑ YES	☐ NO	☐ NA

ANNUAL REPORT CERTIFICATION

I am duly authorized to sign reports required by the INDUSTRIAL ACTIVITIES STORM WATER GENERAL PERMIT (see Standard Provision C.9) and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: Jerry Martinez

Signature: Jerry Martinez Date: 6/15/05

Title: Operations Manager

2004-2005

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N/A

FORM 1-SAMPLING & ANALYSIS RESULTS

SIDE A

FIRST STORM EVENT

- If analytical results are less than the detection limit (or non detectable), show the value as less than the numerical value of the detection limit (example: <.05)
- If you did not analyze for a required parameter, do not report "0". Instead, leave the appropriate box blank
- When analysis is done using portable analysis (such as portable pH meters, SC meters, etc.), indicate "PA" in the appropriate test method used box.
- Make additional copies of this form as necessary.

NAME OF PERSON COLLECTING SAMPLE(S): Jerry Martinez TITLE: Operations Mgr. SIGNATURE: Jerry Martinez

DESCRIBE DISCHARGE LOCATION Example: NW Out Fall	DATE/TIME OF SAMPLE COLLECTION	TIME DISCHARGE STARTED	ANALYTICAL RESULTS For First Storm Event									
			BASIC PARAMETERS					OTHER PARAMETERS				
			pH	TSS	SC	O&G	TOC					
	____ ☐ AM ☐ PM	☐ AM ____ ☐ PM										
	____ ☐ AM ☐ PM	☐ AM ____ ☐ PM										
	____ ☐ AM ☐ PM	☐ AM ____ ☐ PM										
	____ ☐ AM ☐ PM	☐ AM ____ ☐ PM										
TEST REPORTING UNITS:			pH Units	mg/l	umho/cm	mg/l	mg/l					
TEST METHOD DETECTION LIMIT:												
TEST METHOD USED:												
ANALYZED BY (SELF/LAB):												

TSS - Total Suspended Solids SC - Specific Conductance O&G - Oil & Grease TOC - Total Organic Carbon

N/A

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ANNUAL REPORT

SIDE A

FORM 2-QUARTERLY VISUAL OBSERVATIONS OF AUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

- Quarterly dry weather visual observations are required of each authorized NSWD.
- Observe each authorized NSWD source, impacted drainage area, and discharge location.
- Authorized NSWDs must meet the conditions provided in Section D (pages 5-6), of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: JULY-SEPT. DATE: _____	Observers Name: _____ Title: _____ Signature: _____	WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER? ☐ YES ☐ NO If YES, complete reverse side of this form.
QUARTER: OCT.-DEC. DATE: _____	Observers Name: _____ Title: _____ Signature: _____	WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER? ☐ YES ☐ NO If YES, complete reverse side of this form.
QUARTER: JAN.-MARCH DATE: _____	Observers Name: _____ Title: _____ Signature: _____	WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER? ☐ YES ☐ NO If YES, complete reverse side of this form.
QUARTER: APRIL-JUNE DATE: _____	Observers Name: _____ Title: _____ Signature: _____	WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER? ☐ YES ☐ NO If YES, complete reverse side of this form.

2004-2005
ANNUAL REPORT

FORM 3-QUARTERLY VISUAL OBSERVATIONS OF UNAUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

SIDE A

- Unauthorized NSWDs are discharges (such as wash or rinse waters) that do not meet the conditions provided in Section D (pages 5-6) of the General Permit.
- Quarterly visual observations are required to observe current and detect prior unauthorized NSWDs.
- Quarterly visual observations are required during dry weather and at all facility drainage areas.
- Each unauthorized NSWD source, impacted drainage area, and discharge location must be identified and observed.
- Unauthorized NSWDs that can not be eliminated within 90 days of observation must be reported to the Regional Board in accordance with Section A.10.e of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: JULY-SEPT. DATE/TIME OF OBSERVATIONS ☒ AM ☐ PM 8-21-05 2 45	Observers Name: Jerry Martinez Title: Ops. Mgr. Signature: Jerry Martinez	WERE UNAUTHORIZED NSWDs OBSERVED? ☐ YES ☒ NO WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs? ☐ YES ☒ NO	If YES to either question, complete reverse side.
QUARTER: OCT.-DEC. DATE/TIME OF OBSERVATIONS ☒ AM ☐ PM 11-22-04 8 30	Observers Name: Jerry Martinez Title: Ops Mgr. Signature: Jerry Martinez	WERE UNAUTHORIZED NSWDs OBSERVED? ☐ YES ☒ NO WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs? ☐ YES ☒ NO	If YES to either question, complete reverse side.
QUARTER: JAN.-MARCH DATE/TIME OF OBSERVATIONS ☐ AM ☒ PM 2-15-05 3 45	Observers Name: Jerry Martinez Title: Ops Mgr. Signature: Jerry Martinez	WERE UNAUTHORIZED NSWDs OBSERVED? ☐ YES ☒ NO WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs? ☐ YES ☒ NO	If YES to either question, complete reverse side.
QUARTER: APRIL-JUNE DATE/TIME OF OBSERVATIONS ☐ AM ☒ PM 5-10-05 2 05	Observers Name: Jerry Martinez Title: Ops Mgr. Signature: Jerry Martinez	WERE UNAUTHORIZED NSWDs OBSERVED? ☐ YES ☒ NO WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs? ☐ YES ☒ NO	If YES to either question, complete reverse side.

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ANNUAL REPORT

FORM 4-MONTHLY VISUAL OBSERVATIONS OF

SIDE A

STORM WATER DISCHARGES

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

17-18-19-20-26-27 Observation Date: October ____ 2004 No Discharge During Bus Hrs Observers Name: Jerry Hartline Title: Ops Mgr Signature: Jerry Hartline	Drainage Location Description	#1	#2	#3	#4
	Observation Time	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Time Discharge Began	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
8-27-28-30 Observation Date: November ____ 2004 No Discharge During Bus Hrs Observers Name: ____ Title: ____ Signature: Jerry Hartline	Drainage Location Description	#1	#2	#3	#4
	Observation Time	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Time Discharge Began	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
4-5-7-27-31 Observation Date: December ____ 2004 No Discharge During Bus Hrs Observers Name: ____ Title: ____ Signature: Jerry Hartline	Drainage Location Description	#1	#2	#3	#4
	Observation Time	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Time Discharge Began	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
1-2-3-7-8-9-10-26 Observation Date: January ____ 2005 No Discharge During Bus Hrs Observers Name: ____ Title: ____ Signature: Jerry Hartline	Drainage Location Description	#1	#2	#3	#4
	Observation Time	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Time Discharge Began	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

2004-2005

ANNUAL REPORT

FORM 4 (Continued)-MONTHLY VISUAL OBSERVATIONS OF

SIDE A

STORM WATER DISCHARGES

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

Observation Date: February 21 2005 No Discharge During Business Hr Observers Name: Jerry Martinez Title: Ops Mgr. Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Time Discharge Began	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: March 21 2005 No Discharge During Business Hr Observers Name: Title: Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Time Discharge Began	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: April 21 2005 No Discharge During Business Hr Observers Name: Title: Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Time Discharge Began	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: May 21 2005 No Discharge During Business Hr Observers Name: Title: Signature: Jerry Martinez	Drainage Location Description	#1	#2	#3	#4
	Observation Time	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Time Discharge Began	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.	☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

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SIDE A

FORM 5-ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY BMP STATUS

EVALUATION DATE: 5-10-05 INSPECTOR NAME: Jerry Martinez TITLE: Operations Mgr. SIGNATURE: Jerry Martinez

POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)			If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
Hazardous Waste Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐ YES ☒ NO			
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐ YES ☒ NO			
Dismantling Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐ YES ☒ NO			
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐ YES ☒ NO			
Vehicle Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐ YES ☒ NO			
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐ YES ☒ NO			
outside Parts Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED?	☐ YES ☐ NO		Parts on Ground	Put Parts on Racks or Pallets
	ARE ADDITIONAL/REVISED BMPs NECESSARY?	☐ YES ☐ NO			

State of California
STATE WATER RESOURCES CONTROL BOARD

COPY

2000-2001
ANNUAL REPORT
FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

Reporting Period July 1, 2000 through June 30, 2001

An annual report is required to be submitted to your local Regional Water Quality Control Board (Regional Board) by July 1 of each year. This document must be certified and signed, under penalty of perjury, by the appropriate official of your company. Many of the Annual Report questions require an explanation. Please provide explanations on a separate sheet as an attachment. **Retain a copy of the completed Annual Report for your records.**

If any information contained in Items A, B, C, and D below differs from the information provided in your Notice of Intent (NOI), circle or highlight the information that differs from your NOI so we can update our records. Please remember that a Notice of Termination and new Notice of Intent are required whenever a facility is relocated or changes ownership.

If you have any questions, please contact your Regional Board Storm Water Program Contact. The address of the Regional Board (where the Annual Report must be filed) along with the name, telephone number and e-mail address of the contact is indicated on page 9 of this Annual Report. To find your Regional Board information, match the first digit of your WDID number with the corresponding number that appears in parenthesis on the first line of each Regional Board office.

2001 JUN 26 A 10:38

GENERAL INFORMATION:

A. *Facility WDID No:* 4B19S010680

B. *Facility Operator:*

Name: MILT HOFFMAN
Mailing Address: 11590 TUXFORD
City: SUN VALLEY
Contact Person: MILT HOFFMAN
Title: OWNER.
State: CA Zip: 91352 Phone: (818) 504-1173

C. *Facility Information:*

Facility Name: Hadley Bros
Mailing Address: 11590 TUXFORD
City: SUN VALLEY
Contact Person: MILT HOFFMAN
Title: OWNER
State: CA Zip: 91352 Phone: (818) 504-1173
Standard Industrial Classification (SIC) Code(s): 5015, 5093

D. *Facility Location: (Complete if different from facility mailing address in Item C above)*

Street Address:
City:
State: CA Zip:

4. For each storm event sampled, did you collect and analyze a sample from each of the facilitys' storm water discharge locations? ☑ YES, go to Item E.6 ☐ NO

5. Was sample collection or analysis reduced in accordance with Section B.7.d of the General Permit? ☐ YES ☐ NO, attach explanation

   If "YES", **attach documentation** supporting your determination that two or more drainage areas are substantially identical.

   Date facility's drainage areas were last evaluated __/__/__

6. Were all samples collected during the first hour of discharge? ☑ YES ☐ NO, attach explanation

7. Was all storm water sampling preceded by three (3) working days without a storm water discharge? ☑ YES ☐ NO, attach explanation

8. Were there any discharges of stormwater that had been temporarily stored or contained? (such as from a pond) ☐ YES ☑ NO, go to Item E.10

9. Did you collect and analyze samples of temporarily stored or contained storm water discharges from two storm events? (or one storm event if you checked item D.2.i or iii. above) ☐ YES ☐ NO, attach explanation

10. Section B.5. of the General Permit requires you to analyze storm water samples for pH, Total Suspended Solids (TSS), Specific Conductance (SC), Total Organic Carbon (TOC) or Oil and Grease (O&G), other pollutants likely to be present in storm water discharges in significant quantities, and analytical parameters listed in Table D of the General Permit.

    a. Does Table D contain any additional parameters related to your facility's SIC code(s)? ☑ YES ☐ NO, Go to Item E.11

    b. Did you analyze all storm water samples for the applicable parameters listed in Table D? ☐ YES ☑ NO Cu + Zn NOT Al + Fe

    c. If you did not analyze all storm water samples for the applicable Table D parameters, check one of the following reasons:

    ____ In prior sampling years, the parameter(s) have not been detected in significant quantities from two consecutive sampling events. **Attach explanation**

    ____ The parameter(s) is not likely to be present in storm water discharges and authorized non-storm water discharges in signlficant quantities based upon the facility operator's evaluation. Attach explanation

    ____ Other. **Attach explanation**

11 For each storm event sampled, attach a copy of the laboratory analytical reports and report the sampling and analysis results using Form 1 or its equivalent. The following must be provided for each sample collected:

- Date and time of sample collection
- Name and title of sampler.
- Parameters tested.
- Name of analytical testing laboratory.
- Discharge location identification.
- Testing results.
- Test methods used.
- Test detection limits.
- Date of testing.
- Copies of the laboratory analytical results.

G. MONTHLY WET SEASON VISUAL OBSERVATIONS

Section B.4.a of the General Permit requires you to conduct monthly visual observations of storm water discharges at all storm water discharge locations during the wet season. These observations shall occur during the first hour of discharge or, in the case of temporarily stored or contained storm water, at the time of discharge.

1. Indicate below whether monthly visual observations of storm water discharges occurred at all discharge locations. **Attach an explanation for any "NO" answers.** Include in this explanation whether any eligible storm events occurred during scheduled facility operating hours that did not result in a storm water discharge, and provide the date, time, name and title of the person who observed that there was no storm water discharge.

	YES	NO		YES	NO
October	☐	☑ NO RAIN	February	☑	☐
November	☐	☑ "	March	☐	☑ NO DISCHARGE
December	☐	☑ "	April	☐	☑ NOT DURING BUS. HRS.
January	☑	☐	May	☐	☑ NO RAIN

2. Report monthly wet season visual observations using **Form 4** or provide the following information.
   a. date, time, and location of observation
   b. name and title of observer
   c. characteristics of the discharge (i.e., odor, color, etc.) and source of any pollutants observed.
   d. **any** new or revised BMPs necessary to reduce or prevent pollutants in storm water discharges. Provide new or revised BMP implementation date.

ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION (ACSCE)

H. ACSCE CHECKLIST

Section A.9 of the General Permit requires the facility operator to conduct one ACSCE in each reporting period (July 1-June 30). Evaluations must be conducted within 8-16 months of each other. The SWPPP and monitoring program shall be revised and implemented, as necessary, within 90 days of the evaluation. The checklist below includes the minimum steps necessary to complete a ACSCE. Indicate whether you have performed each step below. Attach an explanation for **any "NO" answers.**

1. Have you inspected all potential pollutant sources and industrial activities areas? ☑ YES ☐ NO
   The following areas should be inspected:

   - areas where spills and leaks have occured during the last year.
   - outdoor wash and rinse areas.
   - process/manufacturing areas.
   - loading, unloading, and transfer areas.
   - waste storage/disposal areas.
   - dust/particulate generating areas.
   - erosion areas.
   - building repair, remodeling, and construction
   - material storage areas
   - vehicle/equipment storage areas
   - truck parking and access areas
   - rooftop equipment areas
   - vehicle fueling/maintenance areas
   - non-storm water discharge generating areas

2. Have you reviewed your SWPPP to assure that its BMPs address existing potential pollutant sources and industrial activities areas? ☑ YES ☐ NO

3. Have you inspected the entire facility to verify that the SWPPP's site map, is up-to-date? The following site map items should be verified: ☑ YES ☐ NO

   - facility boundaries
   - outline of all storm water drainage areas
   - areas impacted by run-on
   - storm water discharges locations
   - storm water collection and conveyance system
   - structural control measures such as catch basins, berms, containment areas, oil/water separators, etc

4 Have you reviewed all General Permit compliance records generated since the last annual evaluation? ☑ YES ☐ NO

ATTACHMENT SUMMARY

Answer the questions below to help you determine what should be attached to this annual report. Answer NA (Not Applicable) to questions 2-4 if you are not required to provide those attachments.

1. Have you attached Forms 1,2,3,4, and 5 or their equivalent? ☑ YES (Mandatory)

2. If you conducted sampling and analysis, have you attached the laboratory analytical reports? ☑ YES ☐ NO ☐ NA

3. If you checked box II, III, IV, or V in item D.2 of this Annual Report, have you attached the first page of the appropriate certifications? ☐ YES ☐ NO ☑ NA

4. Have you attached an explanation for each "NO" answer in items E.1, E.2, E.5-E.7, E.9, E.10.c, F.1.b, F.2.a, F.2.c, G.1, H.1-H.7, or J? ☑ YES ☐ NO ☐ NA

ANNUAL REPORT CERTIFICATION

I am duly authorized to sign reports required by the INDUSTRIAL ACTIVITIES STORM WATER GENERAL PERMIT (see Standard Provision C.9) and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: Milt Hoffman

Signature: _____ Date: 5/31/01

Title: _____

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FORM 1-SAMPLING & ANALYSIS RESULTS

SIDE A

FIRST STORM EVENT

- If analytical results are less than the detection limit (or non detectable), show the value as less than the numerical value of the detection limit (example: <.05)
- If you did not analyze for a required parameter, do not report "0". Instead, leave the appropriate box blank
- When analysis is done using portable analysis (such as portable pH meters, SC meters, etc.), indicate "PA" in the appropriate test method used box.
- Make additional copies of this form as necessary.

NAME OF PERSON COLLECTING SAMPLE(S): Milt Hoffman TITLE: GM SIGNATURE:

DESCRIBE DISCHARGE LOCATION Example: NW Out Fall	DATE/TIME OF SAMPLE COLLECTION	TIME DISCHARGE STARTED	ANALYTICAL RESULTS For First Storm Event									
			BASIC PARAMETERS					OTHER PARAMETERS				
			pH	TSS	SC	O&G	TOC	Cu	Pb	Zn		
TELFAIR / PENROSE	1/8/01 2:15 ☐AM ☒PM	2:00 ☐AM ☒PM	6.80	7.0	230	10		0.031	0.016	0.127		
TELFAIR / EAST	1/8/01 2:20 ☐AM ☒PM	2:10 ☐AM ☒PM	6.05	27	360	11		0.124	0.020	0.242		
	/ / : ☐AM ☐PM	: ☐AM ☐PM										
	/ / : ☐AM ☐PM	: ☐AM ☐PM										
TEST REPORTING UNITS:			pH Units	mg/l	umho/cm	mg/l	mg/l					
TEST METHOD DETECTION LIMIT:												
TEST METHOD USED:												
ANALYZED BY (SELF/LAB):			LAB									

TSS - Total Suspended Solids SC - Specific Conductance O&G - Oil & Grease TOC - Total Organic Carbon

N/A

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FORM 2-QUARTERLY VISUAL OBSERVATIONS OF AUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

SIDE A

- Quarterly dry weather visual observations are required of each authorized NSWD.
- Observe each authorized NSWD source, impacted drainage area, and discharge location.
- Authorized NSWDs must meet the conditions provided in Section D (pages 5-6), of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: JULY-SEPT. DATE: __/__/__	Observers Name: _____ Title: _____ Signature: _____	WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER? ☐ YES ☐ NO If YES, complete reverse side of this form.
QUARTER: OCT.-DEC. DATE: __/__/__	Observers Name: _____ Title: _____ Signature: _____	WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER? ☐ YES ☐ NO If YES, complete reverse side of this form.
QUARTER: JAN.-MARCH DATE: __/__/__	Observers Name: _____ Title: _____ Signature: _____	WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER? ☐ YES ☐ NO If YES, complete reverse side of this form.
QUARTER: APRIL-JUNE DATE: __/__/__	Observers Name: _____ Title: _____ Signature: _____	WERE ANY AUTHORIZED NSWDs DISCHARGED DURING THIS QUARTER? ☐ YES ☐ NO If YES, complete reverse side of this form.

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FORM 3-QUARTERLY VISUAL OBSERVATIONS OF UNAUTHORIZED NON-STORM WATER DISCHARGES (NSWDs)

- Unauthorized NSWDs are discharges (such as wash or rinse waters) that do not meet the conditions provided in Section D (pages 5-6) of the General Permit.
- Quarterly visual observations are required to observe current and detect prior unauthorized NSWDs.
- Quarterly visual observations are required during dry weather and at all facility drainage areas.
- Each unauthorized NSWD source, impacted drainage area, and discharge location must be identified and observed.
- Unauthorized NSWDs that can not be eliminated within 90 days of observation must be reported to the Regional Board in accordance with Section A.10.e of the General Permit.
- Make additional copies of this form as necessary.

QUARTER: **JULY-SEPT.** **DATE/TIME OF OBSERVATIONS** 8/15/00 8:30 ☒ AM ☐ PM	Observers Name: Milt Hoffman Title: G.M Signature:	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **OCT.-DEC.** **DATE/TIME OF OBSERVATIONS** 11/13/00 10:15 ☒ AM ☐ PM	Observers Name: Title: Signature:	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **JAN.-MARCH** **DATE/TIME OF OBSERVATIONS** 1/16/01 9:30 ☒ AM ☐ PM	Observers Name: Title: Signature:	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.
QUARTER: **APRIL-JUNE** **DATE/TIME OF OBSERVATIONS** 5/16/01 3:15 ☐ AM ☒ PM	Observers Name: Title: Signature:	**WERE UNAUTHORIZED NSWDs OBSERVED?** ☐ YES ☒ NO **WERE THERE INDICATIONS OF PRIOR UNAUTHORIZED NSWDs?** ☐ YES ☒ NO	If **YES** to either question, complete reverse side.

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ANNUAL REPORT

FORM 4-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

SIDE A

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

Observation Date: October 2000 (NO Rain)	Drainage Location Description	#1	#2	#3	#4
Observers Name: Milt Hoffman	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Title: G.M.	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Signature:	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: November 2000 (NO Rain)	Drainage Location Description	#1	#2	#3	#4
Observers Name:	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Title:	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Signature:	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: December 2000 (NO Rain)	Drainage Location Description	#1	#2	#3	#4
Observers Name:	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Title:	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Signature:	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: January 8 2001	Drainage Location Description	#1 Tel Fair / Penrose	#2 Penrose East	#3	#4
Observers Name	Observation Time	2:15 ☒ P.M. ☐ A.M.	2:20 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Title	Time Discharge Began	2:00 ☒ P.M. ☐ A.M.	2:10 ☒ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
Signature	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐

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FORM 4 (Continued)-MONTHLY VISUAL OBSERVATIONS OF STORM WATER DISCHARGES

SIDE A

- Storm water discharge visual observations are required for at least one storm event per month between October 1 and May 31.
- Visual observations must be conducted during the first hour of discharge at all discharge locations.
- Discharges of temporarily stored or contained storm water must be observed at the time of discharge.
- Indicate "None" in the first column of this form if you did not conduct a monthly visual observation.
- Make additional copies of this form as necessary.
- Until a monthly visual observation is made, record any eligible storm events that do not result in a storm water discharge and note the date, time, name, and title of who observed there was no storm water discharge.

Observation Date: February 11 2001 Observers Name: Matt Hoffman Title: GM Signature: 3-16	Drainage Location Description	#1 Telegair / Penrose	#2 Penrose East	#3	#4
	Observation Time	10: ☐ P.M. ☒ A.M.	10:05 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	9:30 ☐ P.M. ☒ A.M.	9:40 ☐ P.M. ☒ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☒	YES ☐ NO ☒	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: March ____ 2001 Observers Name: ____ Title: ____ Signature: ____	No Discharge Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: April 27 2001 Observers Name: ____ Title: ____ Signature: ____	Not During Bus Hrs Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
Observation Date: May ____ 2001 NO RAIN Observers Name ____ Title ____ Signature ____	Drainage Location Description	#1	#2	#3	#4
	Observation Time	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Time Discharge Began	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.	: ☐ P.M. ☐ A.M.
	Were Pollutants Observed (If yes, complete reverse side)	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

2000-2001

ANNUAL REPORT

FORM 5-ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY BMP STATUS

SIDE A

EVALUATION DATE: 5/16/01 INSPECTOR NAME: Matt Hoffman TITLE: BM SIGNATURE:

POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)				
Hazardous Waste Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO			
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)				
Dismantling Area Car Compactor	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO			
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)				
Vehicle Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP Implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO			
POTENTIAL POLLUTANT SOURCE/INDUSTRIAL ACTIVITY AREA (as identified in your SWPPP)				
Outside Parts Storage Area	HAVE ANY BMPs NOT BEEN FULLY IMPLEMENTED? ☐ YES ☒ NO	If yes, to either question, complete the next two columns of this form	Describe deficiencies in BMPs or BMP implementation	Describe additional/revised BMPs or corrective actions and their date(s) of implementation
	ARE ADDITIONAL/REVISED BMPs NECESSARY? ☐ YES ☒ NO			

ASSOCIATED LABORATORIES
806 North Batavia - Orange, California 92868 - 714/771-6900

FAX 714/538-1209

CLIENT Brash Industries (8606)
ATTN: Marvin Saches
4635 Admiralty Way
Marina Del Rey, CA 90292

LAB REQUEST 65504

REPORTED 01/24/2001
RECEIVED 01/10/2001

PROJECT Aadlen Bros. Auto Wrecking

SUBMITTER Client

COMMENTS

This laboratory request covers the following listed samples which were analyzed for the parameters indicated on the attached Analytical Result Report. All analyses were conducted using the appropriate methods as indicated on the report. This cover letter is an integral part of the final report.

Order No.	Client Sample Identification
237834	Telfair/Penrose
237835	Telfair/East

Thank you for the opportunity to be of service to your company. Please feel free to call if there are any questions regarding this report or if we can be of further service.

ASSOCIATED LABORATORIES by,

Edward S. Behare, Ph.D.
Vice President

NOTE: Unless notified in writing , all samples will be discarded by appropriate disposal protocol 30 days from date reported.

TESTING & CONSULTING
Chemical
Microbiological
Environmental

Order #: 237834
Matrix: WATER
Date Sampled: 01/08/2001
Time Sampled:
Sampled By:

Client: Brush Industries
Client Sample ID: Telfair/Penrose

Analyte	Result	DF	DLR	Units	Date/Analyst	
120.1 Conductivity						
Conductivity	230	1	1.0	umhos/cm	01/14/01	NS
150.1 pH						
pH	6.80	1		NA	01/14/01	NS
160.2 Total Suspended Solids (TSS)						
Total Suspended Solids	7.0	1	5.0	mg/L	01/15/01	LN
200.7 ICP Total Metals - Water Only						
Copper	0.031	1	0.004	mg/L	01/19/01	KN
Lead	0.016	1	0.002	mg/L	01/22/01	LM
Zinc	0.127	1	0.002	mg/L	01/19/01	KN
20B Oil and Grease, Gravimetric						
Total Oil and Grease	10	1	5.0	mg/L	01/16/01	LN

LR = Detection limit for reporting purposes, ND = Not Detected below indicated detection limit, DF = Dilution Facto

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182 (909) 396-2000

JANUARY 16, 1996

ID - 058279
AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY CA 91352-3186

PERMIT RENEWALS

PERMIT NUMBER	DESCRIPTION	APPLIC NUMBER	EXPIRATION DATE
D25283	LANDFILL GAS COLLECTION	160421	02/16/97
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	295992	02/16/97

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
(909) 396-2000 · http://www.aqmd.gov

DATE: 01-16-97

EQUIPMENT LOCATED AT: 11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

LEGAL OWNER OR OPERATOR CO. ID: 58279
AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

PERMIT RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	EXPIRE DATE
295993	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-98
D25283	LANDFILL GAS COLLECTION	02-16-98
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-98

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
(909) 396-2000 · http://www.aqmd.gov

DATE: 01-06-99

EQUIPMENT LOCATED AT: 11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

LEGAL OWNER CO. ID: 58279
OR OPERATOR AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

PERMIT RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	EXPIRE DATE
BILLING YEAR : 1998		
295993	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-00
D25283	LANDFILL GAS COLLECTION (>50 WELLS)	02-16-00
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-00

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
(909) 396-2000 • http://www.aqmd.gov

DATE: 01-16-01

EQUIPMENT LOCATED AT: 11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

LEGAL OWNER CO. ID: 58279
OR OPERATOR AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

PERMIT RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR : 2000		
295993	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-02
D25283	LANDFILL GAS COLLECTION (>50 WELLS)	02-16-02
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-02

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
(909) 396-2000 • http://www.aqmd.gov

DATE: 03-19-02

EQUIPMENT LOCATED AT: 11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

LEGAL OWNER CO. ID: 58279
OR OPERATOR AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY, CA 91352- 31[illegible]

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2001	
D25283	LANDFILL GAS COLLECTION (>50 WELLS)	02-16-03
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-03

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
(909) 396-2000 • www.aqmd.gov

DATE: 01-16-03

EQUIPMENT LOCATED AT: 11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

LEGAL OWNER CO. ID: 58279
OR OPERATOR AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2002	
380648	STORAGE TANK OTHER W/CTL MISC PRODUCTS	02-16-04
D25283	LANDFILL GAS COLLECTION (>50 WELLS)	02-16-04
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-04

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
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DATE: 02-03-04

EQUIPMENT LOCATED AT: 11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

LEGAL OWNER CO. ID: 58279
OR OPERATOR AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2003	
380648	STORAGE TANK OTHER W/CTL MISC PRODUCTS	02-16-05
D25283	LANDFILL GAS COLLECTION (>50 WELLS)	02-16-05
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-05

South Coast
Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

DATE: 01-19-05

EQUIPMENT LOCATED AT: 11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

LEGAL OWNER CO. ID: 58279
OR OPERATOR AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2004	
380648	STORAGE TANK OTHER W/CTL MISC PRODUCTS	02-16-06
D25283	LANDFILL GAS COLLECTION (>50 WELLS)	02-16-06
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-06

South Coast
Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

DATE: 02-01-06

EQUIPMENT LOCATED AT: 11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

LEGAL OWNER CO. ID: 58279
OR OPERATOR AADLEN BROTHERS WRECKING
11590 TUXFORD ST
SUN VALLEY, CA 91352- 3186

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2005	
380648	STORAGE TANK OTHER W/CTL MISC PRODUCTS	02-16-07
D25283	LANDFILL GAS COLLECTION (>50 WELLS)	02-16-07
D85515	STORAGE TANK ORGANIC CHEMICALS MISC	02-16-07